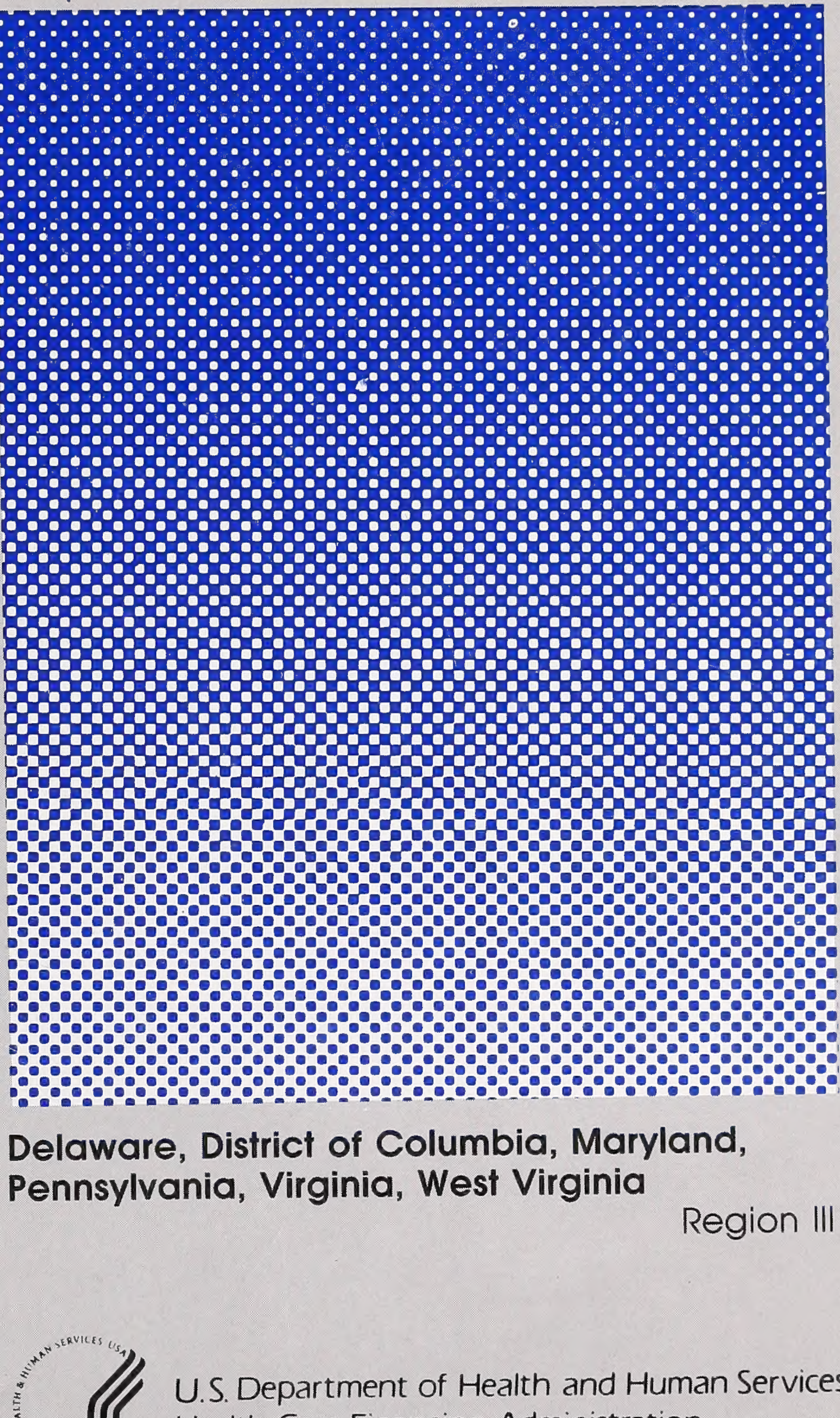
MEDICARE HOSPITAL MORTALITY INFORMATION

87



Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia

Region III

U.S. Department of Health and Human Services
Health Care Financing Administration

RA981
.A2
M43
1987
Region III

MEDICARE HOSPITAL MORTALITY INFORMATION

1987

DELAWARE, DISTRICT OF COLUMBIA, MARYLAND,
PENNSYLVANIA, VIRGINIA, WEST VIRGINIA

REGION III

OTIS R. BOWEN, M.D.
SECRETARY
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

WILLIAM L. ROPER, M.D.
ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION

The Health Care Financing Administration (HCFA) was established on March 9, 1977, to combine health financing and quality assurance programs into a single agency. HCFA is responsible for the Medicare program, Federal participation in the Medicaid program, the Peer Review Organization program and a variety of other health care quality assurance programs.

The mission of the Health Care Financing Administration is to ensure the effective administration of our programs in order to promote the timely delivery of appropriate, quality health care to over 56 million of the nation's aged, disabled and poor. The agency must also ensure that beneficiaries are aware of the services for which they are eligible, that those services are accessible and of high quality, and that agency policies and actions promote efficiency and quality within the total health care delivery system.

TABLE OF CONTENTS

INTRODUCTION i
DESCRIPTION OF MORTALITY INFORMATION v

DELAWARE

BEEBE HOSP OF SUSSEX CNTY INC 1
KENT GENERAL HOSP INC 4
MEDICAL CENTER OF DELAWARE 7
MILFORD MEMORIAL HOSPITAL INC 10
NANTICOKE MEMORIAL HOSP INC 11
RIVERSIDE HOSP 12
ST FRANCIS HOSP INC 13

DISTRICT OF COLUMBIA

CAPITOL HILL HOSP 16
COLUMBIA HOSP FOR WOMEN 18
DISTRICT OF COLUMBIA GEN HOSP 19
GEORGE WASHINGTON UNIV HOSP 23
GEORGETOWN UNIV HOSP 24
GREATER SE HOSP 26
HADLEY MEMORIAL HOSP 29
HOWARD UNIVERSITY HOSPITAL 30
PROVIDENCE HOSP 31
SIBLEY MEMORIAL HOSP 34
WALTER REED ARMY HOSP 38
WASHINGTON HOSP CTR 39

MARYLAND

AMI DOCTORS HOSP PRINCE GEORGE CNTY 40
ANNE ARUNDEL GEN HOSP 41
BALTIMORE CNTY GENL HOSP 42
BON SECOURS HOSP 44
CALVERT MEMORIAL HOSP 46
CARROLL COUNTY GEN HOSP 49
CHILDRENS HOSP INC 50
CHURCH HOSP CORP 51
DORCHESTER GENERAL HOSP 53
EDWARD W MCCREADY MEMORIAL HOSPITAL 55
EUGENE LELAND MEMORIAL HOSPITAL 57
FALLSTON GENERAL HOSP 60
FRANCIS SCOTT KEY MED CTR 61
FRANKLIN SQUARE HOSP 64
FREDERICK MEMORIAL HOSP 65
FROSTBURG COMM HOSP 68
GARRETT COUNTY MEMORIAL HOSP 69
GOOD SAMARITAN HOSP 72
GREATER BALTIMORE MEDICAL CENTER 73

GREATER LAUREL-BELTSVILLE HOSP 76
HARFORD MEMORIAL HOSPITAL 78
HOLY CROSS HOSPITAL 79
HOWARD CNTY GNRL HOSP INC 80
JAMES LAWRENCE KERNAN HOSP INC 81
JOHNS HOPKINS HOSP 82
KENT & QUEEN ANNES HOSP 86
LIBERTY MEDICAL CNTR 87
MARYLAND GEN HOSP 90
MEM HOSP AND MED CTR CUMBERLAND INC 93
MEMORIAL HOSP AT EASTON 95
MERCY HOSP INC 96
MONTGOMERY GENERAL HOSPITAL INC 98
NORTH ARUNDEL HOSPITAL 99
NORTH CHARLES GNRL HOSP 100
PARKWOOD HOSPITAL 101
PENINSULA GENL HOSP 104
PHYSICIANS MEMORIAL HOSPITAL 105
PRINCE GEORGES GENL HOSPITAL 108
SACRED HEART HOSPITAL 109
SHADY GROVE ADVENTIST HOSP 111
SINAI HOSPITAL 113
SOUTH BALTIMORE GEN HOSP 115
SOUTHERN MARYLAND HOSPITAL 116
ST AGNES HOSPITAL 117
ST JOSEPH HOSPITAL 120
ST MARYS HOSP 123
SUBURBAN HOSP ASSOC 124
UNION HOSP CECIL COUNTY 126
UNION MEMORIAL HOSP 129
UNIVERSITY OF MARYLAND HOSPITAL 130
WASHINGTON ADVENTIST HOSP 133
WASHINGTON COUNTY HOSP 135
WYMAN PARK HEALTH SYSTEM 138

PENNSYLVANIA

ABINGTON MEM HOSP 140
ALBERT EINSTEIN MED CNTR 141
ALIQUIPPA HOSPITAL 144
ALLEGHENY GENERAL HOSP 146
ALLEGHENY VALLEY HOSP 147
ALLENTOWN HOSPITAL 148
ALLENTOWN OSTEO HOSP 149
ALTOONA HOSP 150
AMERICAN ONCOLOGIC HOSPITAL 152

ANDREW KAUL MEM HOSP 153
ARMSTRONG COUNTY MEMORIAL HOSPITAL 156
ASHLAND STATE GENERAL HOSP 157
BARNES KASSON COUNTY HOSP 158
BERWICK HOSP 159
BLOOMSBURG HOSP 160
BRADDOCK GENERAL HOSPITAL 161
BRADFORD HOSPITAL 163
BRANDYWINE HOSPITAL 166
BROOKVILLE HOSPITAL 167
BROWNSVILLE GENERAL HOSP 168
BRYN MAWR HOSP 169
BUCTAIL MEDICAL CTR 170
BUTLER MEMORIAL HOSP 171
CANONSBURG GENERAL HOSPITAL 172
CARBONDALE GEN HOSP 174
CARLISLE HOSP 175
CARON HOSPITAL 177
CENTRAL MEDICAL CENTER HOSPITAL 179
CENTRE COMMUNITY HOSP 181
CHAMBERSBURG HOSPITAL 184
CHARLES COLE MEMORIAL HOSP 185
CHESTER CO HOSP 186
CHESTNUT HILL HOSP 188
CITIZENS GENERAL HOSP 189
CLARION OSTEOPATHIC COMM HOSP 192
CLEARFIELD HOSP 194
COALDALE STATE GNRL HOSP 195
COLUMBIA HOSP 196
COMMUNITY GENERAL HOSP 199
COMMUNITY GENERAL OSTEOPATHIC HOSPIT 200
COMMUNITY HOSP OF LANCASTER 202
COMMUNITY HOSPITAL 205
COMMUNITY MEDICAL CTR 206
CONEMAUGH VALLEY MEMORIAL HOSP 207
CORRY MEM HOSP 209
CROZER CHESTER MEDICAL CENTER 211
DELAWARE CO MEM HOSP 214
DELAWARE VALLEY MEDICAL CTR 217
DIVINE PROVIDENCE HOSP 218
DIVINE PROVIDENCE HOSP 220
DOYLESTOWN HOSP 222
DUBOIS REGIONAL MED CNTR 226
EASTON HOSP 228
ELIZABETHTOWN HOSPITAL & REHAB CENTER 229
ELK COUNTY GENERAL HOSPITAL 230

ELLWOOD CITY HOSP 231
EPHRATA COMM HOSP 232
EPISCOPAL HOSPITAL 233
EVANGELICAL COMMUNITY HOSPITAL 234
EYE AND EAR HOSP OF PITTSBURGH 235
FORBES METROPOLITAN HEALTH CENTER 238
FORBES REGIONAL HEALTH CENTER 239
FRANKFORD HOSP 243
FRANKLIN REGIONAL MEDCL CNTR 247
FRICK COMMUNITY HEALTH CENTER 248
FULTON COUNTY MED CTR 249
GEISINGER MEDICAL CTR 250
GEISINGER-WYOMING VALLEY MED CTR 251
GERMANTOWN HOSPITAL MED CENTER 254
GNADEN HUETTEN MEM HOSP 255
GOOD SAMARITAN HOSP 258
GOOD SAMARITAN HOSPITAL 260
GRADUATE HOSP 261
GRAND VIEW HOSP 263
GREENE COUNTY MEMORIAL HOSPITAL 266
GREENVILLE HOSP 269
HAHNEMANN UNIVERSITY HOSP 272
HAMOT MEDICAL CTR 275
HANOVER GENERAL HOSP 278
HARRISBURG HOSP 280
HAVERFORD GENERAL HOSP 283
HAZLETON GENL HOSP 284
HAZLETON ST JOSEPH MED CTR 285
HIGHLANDS HOSPITAL AND HEALTH CTR 287
HOLY REDEEMER HOSP & MED CTR 288
HOLY SPIRIT HOSP 290
HOSP OF HOME FOR JEWISH AGED 293
HOSP OF UNIV OF PENNSYLVANIA 297
HOSPITAL OF THE MED COLL OF PA 300
HOSPITAL PHILA COLLEGE OSTEOPATHIC M 303
INDIANA HOSPITAL 305
JAMES C GIUFFRE MED CTR 308
JAMESON MEM HOSP 309
JC BLAIR MEMORIAL HOSPITAL 312
JEANES HOSP 316
JEANNETTE DISTRICT MEMORIAL HOSPITAL 318
JEFFERSON HOSPITAL 319
JEFFERSON PARK HOSPITAL 320
JERSEY SHORE HOSPITAL 321
JOHN F KENNEDY MEMORIAL HOSPITAL 322
KENSINGTON HOSP 324

LANCASTER GENERAL HOSPITAL . . . 325
LANKENAU HOSP . . . 327
LATROBE AREA HOSP . . . 330
LAWNDALE COMMUNITY HOSP . . . 331
LEBANON VLY GEN HOSP . . . 332
LEE HOSP . . . 333
LEHIGH VALLEY HOSPITAL CENTER . . . 335
LEWISTON HOSP . . . 336
LOCK HAVEN HOSPITAL . . . 339
LOWER BUCKS HOSP . . . 341
MAGEE WOMEN'S HOSP . . . 344
MCKEESPORT HOSPITAL . . . 347
MEADVILLE MEDICAL CENTER . . . 350
MEDICAL CENTER BEAVER PA INC . . . 351
MEMORIAL HOSP . . . 352
MEMORIAL HOSP INC . . . 354
MEMORIAL HOSP OF BEDFORD CNTY . . . 356
MERCY CATHOLIC MEDICAL CENTER . . . 359
MERCY HOSP . . . 361
MERCY HOSPITAL . . . 364
MERCY HOSPITAL . . . 366
MERCY HOSPITAL - PITTSBURGH . . . 370
MERCY HOSPITAL OF JOHNSTOWN . . . 373
METHODIST HOSPITAL . . . 376
METRO HEALTH CENTER . . . 378
METROPOLITAN HOSP . . . 379
METROPOLITAN HOSP PARKVIEW DIV . . . 382
METROPOLITAN HOSP-SPRING DIV . . . 384
MEYERSDALE COMMUNITY HOSP . . . 386
MID VALLEY HOSPITAL ASSN . . . 387
MILLCREEK COMMUNITY HOSPITAL . . . 390
MINERS HOSP OF NORTH CAMBRIA . . . 393
MONONGAHELA VALLEY HOSPITAL INC . . . 394
MONSOUR MEDICAL CENTER . . . 397
MONTEFIORE HOSPITAL . . . 401
MONTOGOMERY HOSP . . . 404
MONTROSE GENERAL HOSP INC . . . 405
MOSES TAYLOR HOSP . . . 406
MUHLENBERG MEDICAL CTR . . . 409
MUNCY VALLEY HOSP . . . 412
NANTICOKE STATE GENERAL HOSP . . . 414
NASON HOSP . . . 416
NAZARETH HOSP . . . 417
NESBITT MEMORIAL HOSPITAL . . . 420
NORTH HILLS PASSAVANT HOSPITAL . . . 422
NORTH PENN HOSP . . . 425

NORTHEASTERN HOSP	427
OHIO VALLEY GENERAL HOSPITAL	430
OIL CITY AREA HLTH CNTR INC	431
PALMERTON HOSP	434
PAOLI MEMORIAL HOSP	436
PENNSYLVANIA HOSP	437
PHILIPSBURG STATE GENERAL HOSPITAL	438
PHOENIXVILLE HOSP	439
POCONO MEDICAL CNTR	442
PODIATRY HOSP OF PITTSBURGH	445
POLYCLINIC MEDICAL CENTER	446
POTTSTOWN MEM MED CTR	447
POTTSVILLE HOSP WARNE CLINIC	448
PRESB-UNIV OF PA MED CTR	449
PRESBYTERIAN-UNIVERSITY HOSP	452
PUNXSUTAWNEY AREA HOSP INC	456
QUAKERTOWN HOSP ASSN	459
READING HOSPITAL MED CTR	460
RIDDLE MEM HOSP	461
ROBERT PACKER HOSP	463
ROLLING HILL HOSP/DIAGNOSTIC CTR	464
ROXBOROUGH MEM HOSP	467
SACRED HEART HOSP	469
SACRED HEART HOSP	470
SACRED HEART HOSP	474
SAINT VINCENT HEALTH CENTER	476
SCRANTON STATE GNRL HOSP	479
SEIDLE MEM HOSP	480
SEWICKLEY VALLEY HOSPITAL	482
SHADYSIDE HOSPITAL	483
SHAMOKIN STATE GENERAL HOSPITAL	487
SHARON GENERAL HOSPITAL	488
SHENANGO VALLEY MEDICAL CNTR	490
SOLDIERS & SAILORS MEMORIAL HOSP	491
SOMERSET COMMUNITY HOSPITAL	492
SOUTH SIDE HOSP	494
SOUTHERN CHESTER CTY MED CTR	498
ST AGNES MED CNTR	499
ST CLAIR MEM HOSP	500
ST FRANCIS HOSPITAL OF NEW CASTLE	502
ST FRANCIS MEDICAL CNTR	503
ST JOHNS HEALTH AND HOSPITAL CENTER	505
ST JOSEPH HOSP	507
ST JOSEPH HOSP	508
ST JOSEPHS HOSP	511
ST JOSEPHS HOSP	514

ST LUKES HOSPITAL OF BETHLEHEM 516
ST MARGARET MEM HOSP 519
ST MARY HOSP 521
ST MARY S HOSPITAL INC 522
SUBURBAN GENERAL HOSP 524
SUBURBAN GNRL HOSP 525
SUNBURY COMMUNITY HOSP 526
TAYLOR HOSP 528
TEMPLE UNIVERSITY HOSP 530
THE GETTYSBURG HOSPITAL 532
THOMAS JEFFERSON UNIV HOSP 533
TITUSVILLE HOSP 535
TROY COMMUNITY HOSP INC 536
TYLER MEMORIAL HOSP 537
TYRONE HOSP 538
UNION CITY MEMORIAL HOSP 539
UNIONTOWN HOSP 542
UNITED COMMUNITY HOSP 545
UNIVERSITY HOSP MILTON HERSHEY MED C 547
UNIVERSITY MEDICAL CTR 550
VALLEY FORGE MED CTR & HOSP 551
WARMINSTER GENERAL HOSP 552
WARREN GENERAL HOSP 555
WASHINGTON HOSPITAL 556
WAYNE CNTY MEM HOSP 559
WAYNESBORO HOSP 560
WESTERN PA HOSPITAL 562
WESTMORELAND HOSP ASSOC 565
WESTMORELAND-MC GINNIS HOSP 566
WILKES-BARRE GENL HOSP 567
WILLIAMSPORT HOSP 571
WILLS EYE HOSP 573
WINDBER HOSPITAL WHEELING CLINIC 574
YORK HOSPITAL 576

VIRGINIA

ALEXANDRIA HOSPITAL 578
ALLEGHENY HOSP 581
ARLINGTON HOSP 582
BATH COUNTY COMM HOSP 586
BEDFORD COUNTY MEMORIAL HOSP 588
BLUE RIDGE HOSP DIV/UNIV OF VA 590
BUCHANAN GENERAL HOSP 591
CENTRAL VIRGINIA TRNG CNTR MS 592
CHESAPEAKE GEN HOSP 595

CHIPPENHAM HOSP 597
COMM HOSP OF ROANOKE VALLEY 599
COMMUNITY MEMORIAL HOSP 600
CULPEPER MEM HOSP INC 601
DEPAUL HOSP 602
DICKERSON COUNTY MED CNTR 605
EASTERN STATE HOSP 606
FAIR OAKS HOSP 607
FAIRFAX HOSP 611
FRANKLIN MEMORIAL HOSP 614
GILES MEMORIAL HOSPITAL 615
GILL MEMORIAL EYE EAR NOSE THROAT 616
GREENSVILLE MEM HOSPITAL 617
HALIFAX COMMUNITY HOSP 620
HENRICO DOCTORS HOSP 621
HIRIAM DAVIS MEM HOSP 622
HOSPICE OF NORTHERN VA INC 623
HUMANA HOSP BAYSIDE 625
HUMANA HOSP CLINCH VALLEY 628
HUMANA HOSP-ST LUKES 631
JEFFERSON MEMORIAL HOSPITAL 634
JOHN RANDOLPH HOSP 637
JOHNSTON MEMORIAL HOSP 639
JOHNSTON-WILLIS HOSPITAL 640
KINGS DAUGHTERS HOSP 643
LEE CO HOSP 644
LEWIS-GALE HOSPITAL 645
LONESOME PINE HOSP 650
LOUDOUN MEMORIAL HOSPITAL 651
LOUISE OBICI MEM HOSP 652
LYNCHBURG GENL HOSP DIV CENTRAL HLTH 653
MARTHA JEFFERSON HOSP 654
MARY IMMACULATE HOSPITAL 658
MARY WASHINGTON HOSP 659
MARYVIEW HOSPITAL 660
MEDICAL COLL OF VIRGINIA 662
MEMORIAL HOSP 664
MEMORIAL HOSPITAL MARTINSVILLE 665
METROPOLITAN HOSPITAL 668
MONTGOMERY REGIONAL HOSPITAL 669
MOUNT VERNON HOSP 670
NATL ORTHOPAEDIC & REHAB HOSP 673
NEWPORT NEWS GENL HOSPITAL 674
NORFOLK COMM HOSP 675
NORTHAMPTON ACCOMACK MEMORIAL HOSPIT 676
NORTHERN VA DOCTORS HOSP 677

NORTON COMMUNITY HOSP 678
PAGE MEMORIAL HOSPITAL 679
PORTSMOUTH GENERAL HOSP 680
POTOMAC HOSPITAL 684
PRINCE WILLIAM HOSP 688
PULASKI COMMUNITY HOSP 691
R J REYNOLDS-PATRICK CO MEM HOSP 692
RADFORD COMMUNITY HOSP 693
RAPPAHANNOCK GEN HOSP 696
RESTON MED CNTR 698
RETREAT HOSPITAL 700
RICHMOND COMMUNITY HOSP 701
RICHMOND EYE AND EAR HOSP 702
RICHMOND MEMORIAL HOSP 704
RIVERSIDE HOSPITAL 706
ROANOKE MEMORIAL HOSP 707
ROCKINGHAM MEM HOSP 709
RUSSELL CNTY MED CNTR 710
SENTARA HAMPTON GENERAL HOSP 711
SENTARA LEIGH HOSPITAL 712
SENTARA NORFOLK GENERAL 715
SHENANDOAH CO MEML HOSP 719
SMYTH COUNTY COMM HOSP 720
SOUTHAMPTON MEM HOSP 721
SOUTHSIDE COMM HOSP 723
SOUTHSIDE REGIONAL MEDICAL CENTER 724
SOUTHWESTERN STATE HOSP 727
ST MARY S HOSPITAL OF RICHMOND 728
ST MARYS HOSP 731
STONEWALL JACKSON HOSPITAL 732
STUART CIRCLE HOSPITAL 733
TAZEWELL COMM HOSP 734
THE FAUQUIER HOSPITAL 735
TIDEWATER MEMORIAL HOSP 736
TWIN COUNTY COMMUNITY HOSPITAL 737
UN OF VA HOSP & CHILDRENS REHAB 738
VIRGINIA BAPTIST HOSP DIV CENTRA HLT 741
VIRGINIA BEACH GENERAL HOSP 742
WALTER REED MEMORIAL HOSPITAL 744
WARREN MEMORIAL HOSPITAL 745
WAYNESBORO COMMUNITY HOSP 746
WESTERN STATE HOSP 747
WILLIAMSBURG COMMUNITY HOSPITAL 749
WINCHESTER MED CNTR INC 750
WISE APPALACHIAN REGIONAL HOSPITAL 751
WYTHE CNTY COMM HOSP 752
WYTHEVILLE HOSP CORP 753

WEST VIRGINIA

ARACOMA MEDICAL FOUNDATION INC 754
BECKLEY APPALACHIAN REG HOSP 755
BECKLEY HOSP 756
BLUEFIELD COMM HOSP 758
BOONE MEMORIAL HOSP 760
BRAXTON COUNTY MEMORIAL HOSP 761
BROADDUS HOSP ASSN INC 762
CABELL-HUNTINGTON HOSPITAL, INC. 763
CALHOUN GENERAL HOSPITAL COUNTY INC 766
CAMDEN CLARK MEMORIAL HOSP 767
CHARLESTON AREA MEDICAL CTR 768
CITY HOSPITAL 770
DAVIS MEMORIAL HOSPITAL 771
ELIZABETH COPLIN LEONARD MEMORIAL HO 772
FAIRMONT GENERAL HOSPITAL 773
GRAFTON CITY HOSP 775
GRANT MEMORIAL HOSPITAL 776
GUTHRIE MEM HOSP INC 777
HAMPSHIRE MEMORIAL HOSP 778
HCA RIVER PARK HOSPITAL 779
HERBERT J THOMAS MEM HOSP 780
HOLDEN HOSPITAL 783
HUMANA HOSP GREENBRIER VALLEY 784
HUMANA HOSP-ST LUKE'S BLUEFIELD 787
JACKSON GENERAL HOSP 790
JEFFERSON MEMORIAL HOSPITAL 791
LOGAN GENERAL HOSP 792
MAN APPALACHIAN REGIONAL HOSP 794
MONONGALIA CO GENERAL HOSP CO 795
MONTGOMERY GENL HOSP 796
MORGAN CO WAR MEM HOSP 797
OHIO VALLEY GENERAL HOSPITAL 798
PLATEAU MEDICAL CENTER 799
PLEASANT VALLEY HOSPITAL 800
POCAHONTAS MEM HOSP 803
POTOMAC VALLEY HOSP 804
PRESTON MEMORIAL HOSP 806
PRINCETON COMMUNITY HOSP 807
PUTNAM GENERAL HOSPITAL 808
RALEIGH GENERAL HOSP 810
REYNOLDS MEM HOSP 811
RICHWOOD AREA HOSP 813
ROANE GEN HOSP 814
SISTERVILLE GENERAL HOSP 815

SOUTH CHARLESTON COMM HOSP INC 816
ST FRANCIS HOSP 817
ST JOSEPH HOSPITAL 818
ST JOSEPHS HOSP 819
ST MARYS HOSP 821
STEVENS CLINIC HOSP 822
STONEWALL JACKSON MEM HOSP 823
SUMMERS COUNTY HOSPITAL 824
SUMMERVILLE MEMORIAL HOSP 825
THE EYE & EAR CLINIC OF CHARLESTON 826
TUCKER CO HOSP 827
UNITED HOSP CTR INC 828
WEBSTER CTY MEMORIAL HOSP 831
WEIRTON MED CTR 601 COLLIERS WAY 832
WEIRTON OSTEOPATHIC HOSPITAL 835
WELCH EMERGENCY HOSPITAL 836
WEST VIRGINIA UNIV HOSP 837
WETZEL CO HOSP 838
WHEELING HOSP 839
WILLIAMSON MEMORIAL HOSPITAL 840
WYOMING GENERAL HOSP 841

TECHNICAL APPENDIX A-1

INTRODUCTION

The nation's Medicare program, which is administered through the Health Care Financing Administration (HCFA) in the Department of Health and Human Services, now has 31 million beneficiaries. One of HCFA's primary responsibilities is to ensure that Medicare beneficiaries receive quality health care. We believe that the publication of the Medicare hospital mortality information contained in this document will contribute to that end.

This particular information release presents information to answer the question: "What is the actual death rate for each hospital compared to what would have been expected for that particular hospital, given what we know of the characteristics of patients admitted?" The statistics are presented in the hope that they will serve the public and the hospitals in their common interest of improving quality of care.

The development of mortality statistics is a complicated and controversial task, since the mortality rate at a given hospital may reflect, among other factors, age, sex, diagnosis, and severity of illness of patients admitted to that hospital, as well as the purpose and quality of the care they received. Characteristics affecting health and the probability of death vary among the patient populations served by individual hospitals. Consequently, the mortality rates in different patient populations will vary.

The usefulness of this information depends upon the accuracy with which mortality rates can be predicted and the stability of these rates over time for each hospital. It is important to understand that the difference between the hospital's mortality rate and the predicted values in the tables contained in this document may not be a direct measure of the quality of care rendered in hospitals. There is one primary reason for this: we do not now have any direct measurement tool with which we can adjust fully for differences among hospitals in how severely ill their patients are. For instance, two hospitals might have very different death rates for patients admitted for stroke, even after we have adjusted for age and sex. This might happen because one hospital's stroke patients consist of a significant number admitted in a coma and are thus more likely to die, whereas another hospital's patient population represents a broader spectrum of patients with cerebrovascular problems, or because these hospitals in fact provide different levels of quality of care. In addition, other factors affecting the probability of death in a particular case (e.g., family status/support) and overall health status are not included in the predictive model because information on them is not readily available.

When properly understood and used, this information can be useful; it can also be very misleading if it is interpreted incorrectly. The information simply describes one of several possible outcomes at a hospital--post admission mortality for Medicare beneficiaries. The information is not necessarily representative of a hospital's total performance in all aspects of patient care, and is best used to view experience in individual hospitals rather than making comparisons among hospitals. Individual hospitals may have very good reasons for their rates being higher than the ranges predicted by HCFA's model. Accordingly, it was important for hospitals to have an opportunity to review their specific information and to provide comments to HCFA and the public. We asked each hospital to prepare its comments on the information being released to the public, and we are including those comments in this publication.

This information is an important contribution to the health care community and should be reviewed by a wide range of individuals and organizations including hospital administrators, Peer Review Organizations, physicians, and researchers. Among these audiences, perhaps the hospital administrator will find the information most useful--as a screening tool and in consulting with medical staff to evaluate a hospital's strengths and weaknesses. In this way, the information should lead to analysis and subsequent actions which will capitalize on areas of strong performance and strengthen areas where improvement is needed. For example, we expect that hospitals and their medical staffs, using established and newly emerging quality assessment techniques, will try to determine what useful information can be derived about their hospitals and how they function.

Consumers should read the explanations of the uses and limitations of the information, as well as any comments a hospital may have provided, and should consider carefully the different roles that different hospitals play in their community. For example, one hospital might have different death rates than another because it serves more severely ill patients or because it is a trauma or emergency center.

The development and presentation of this information continues to be an important part of HCFA's responsibilities in the health care community. Consequently, in making the information as accurate and useful as possible, over the past several years we have discussed the theoretical framework and statistical approach with a number of nationally recognized technical experts in appropriate fields. Based on their recommendations, we continue to believe that the models used in this work are reasonable and appropriate for the intent of the publication.

This year we made three significant changes in the way in which we presented this information:

- First, we are presenting information for 1986 and 1987. The information for 1986 may be somewhat different from that published last December, since it is based on this year's methodology.

- Second, we are including information about each hospital, such as bed size and other characteristics, which we obtained from data contained in the American Hospital Association's (AHA's) 1987 Annual Survey of Hospitals files or, where such information was not available from the AHA file, HCFA's Medicare/Medicaid Automated Certification System (MMACS) files.

- Third, instead of arranging the hospital mortality information and comments alphabetically by State, we have arranged the States regionally according to HCFA's 10 regional offices.

During our discussions with the experts, it was further recommended that we concentrate our efforts this year on validation of the data. Therefore, we have undertaken the following validation studies targeted to coincide with this year's release of the Hospital Mortality Information:

- HCFA is engaged in a statistical evaluation of the Hospital Mortality Information using clinical data abstracted by MediQual Systems, Inc. from over 40,000 medical records from a carefully selected sample of hospitals. The data consist of clinical characteristics of Medicare patients as ascertained in the first 48 hours of hospitalization, and include data from the patient history and preadmission findings, to permit assessment of the severity of illness at admission and its impact upon mortality. The validation consists of a comparison of the results of the mortality rate analyses with and without the adjustments for patient severity permitted by the specially obtained clinical data. This will allow conclusions about the extent to which patient severity impacts the mortality rates. Hospitals which participated in this study have done so voluntarily. HCFA has shared hospital specific results with each facility from which medical records were abstracted.

- We will be comparing results of the mortality rate analyses with the results found by all Peer Review Organizations (PROs) in applying HCFA's Generic Quality Screens to cases reviewed as a part of ongoing PRO review activities. The purpose of this particular validation effort is to determine the extent to which an alternative presumed measure of quality of care correlates with mortality rates.

In addition, the format for presentation, the process for sharing the information with individual hospitals, and the statistical methodology have been discussed at various meetings with leaders of organizations representing Medicare beneficiaries, physicians, and hospitals. Also, we have spent many months reviewing the comments received from the hospitals during the past 2 years regarding their patient-specific data and our mortality information publication.

Many suggestions from these sources have been incorporated into the final publication. For example, following the release, we examined a limited number of cases in which hospitals advised us that an individual shown as deceased on HCFA's records was in fact alive. An analysis of specific cases confirmed that there was a report of a date of death in the HCFA data base at the time the Medicare hospital mortality information was being analyzed. In most cases, we found that the source of the date of death in the record was the hospital inpatient bill provided by the facility. For example, the HCFA records showed that a bill submitted by Hospital "X" for an inpatient stay for a patient ending February 12, 1986 indicated the patient status at time of discharge as "Expired." This bill was processed on April 8, 1986 and served as part of the HCFA data base at the time we prepared the release of hospital mortality information. (For Medicare hospital mortality analyses, we used the Medicare billing records received for the June update of the MEDPAR file.) In July 1987, a bill was processed by HCFA for a subsequent hospital stay for this beneficiary and as a result we removed the date of death from our records. Unfortunately, this subsequent information was obtained too late to be included in the final information release. Although this type of billing problem was minimal on a national basis, we hope that an indirect byproduct of this process will be improved accuracy in coding and billing procedures.

The publication of Medicare Hospital Mortality Information is an ongoing process at HCFA. We are continuing to do everything we can to make this information more useful to both the public and the health care professions. We are refining ways to use the information as a screening tool for "quality of care" purposes, and we are developing tools to adjust for differences in disease severity. Thus, this year we provided hospitals with information on the Medicare Mortality Predictor System (MMPS) which is designed to help hospitals interpret the mortality rates of their patients. In addition, because we recognize that mortality rates alone do not adequately measure how effectively a hospital cares for its patients, we will be developing other measures of outcome, such as the need for medical treatment after discharge, to assess the performance of hospitals more fully.

Just as we made improvements in the methodology used last year, we expect that when the 1989 release is published, it, too, will reflect progress toward more accurate and useful information for hospitals, physicians, and consumers alike. This will contribute to assessment of and improvement in the effectiveness of medical services.

William L. Roper M.D.

William L. Roper, M.D.
Administrator

DESCRIPTION OF MORTALITY INFORMATION

Before reading the tables containing the hospital-specific information and the comments provided by individual hospitals, the reader will find it useful to understand the format and presentation of the information in this document.

The analyses of the mortality rates associated with hospitalizations in 1987 are very similar to those carried out last year on Medicare hospitalizations which occurred in 1986. Only one hospitalization for every patient was used--the last hospitalization with a discharge in calendar year 1987. The event evaluated was death within 30 days of admission to the hospital.

For each hospital, information is presented for overall Medicare patient mortality and each of 16 diagnostic categories. The information consists of the number of Medicare patients, the actual mortality rate, and a range of predicted mortality, given the mix of patients.

The reader should note three significant changes in the way the information is organized in this year's publication:

- First, we are presenting information for 1986 and 1987. The information for 1986 may be somewhat different from that published last December, since it is based on the revised methodology discussed below.

- Second, we are including information about each hospital, such as bed size and other characteristics, which we obtained from data contained in the American Hospital Association's (AHA's) 1987 Annual Survey of Hospitals files or, where such information was not available from the AHA file, HCFA's Medicare/Medicaid Automated Certification System (MMACS) files. These hospital characteristics are found at the bottom of each hospital summary page containing the 1986 and 1987 mortality rates and ranges. A more detailed discussion of the hospital characteristics can be found in the section entitled "Hospital Characteristics Definitions."

- Third, instead of arranging the hospital mortality information and comments alphabetically by State, we have arranged the States regionally according to HCFA's 10 regional offices. Thus, the hospital information and comments are arranged alphabetically by State within each State's respective regional volume. A complete listing of States by region (and volume) can be found at Table 1.

Before reviewing the summary table for your hospital, it would be helpful to describe how the numbers were derived and what they mean:

- Number of Cases. This figure is the number of individual Medicare beneficiaries whose last discharge from a short term, acute care hospital in a calendar year was from the hospital listed. The total number for each hospital is presented under the category "all cases."

Similarly, for each diagnostic category, the number of cases consists of the number of Medicare beneficiaries whose last discharge in the calendar year was from the hospital cited and whose principal diagnosis at admission fell within the specific diagnostic category.

Since only a patient's last hospital discharge (including death occurring in a hospital) is "counted" in the total number, HCFA's computation and that maintained by individual hospitals will generally differ. For example, if John Doe was a patient at Hospital A three times during 1987, the methodology used in HCFA's analysis counts only the last discharge in 1987 in the hospital's total. Normally, a hospital maintains statistics regarding each of its admissions and so would count Mr. Doe as three cases. In addition, in this example, if Mr. Doe were admitted later in the year to Hospital B (another acute care hospital) and then discharged in 1987, and this latter stay represented his last discharge for 1987, his case would be counted in Hospital B's total and he would not appear at all in Hospital A's count.

The key factor to remember is that we are examining last hospital discharges in 1987. In some cases, this will necessitate the inclusion of certain patients admitted to the hospital in 1986 or who died in January 1988.

o Actual Mortality Rate. This figure presents the percentage of each hospital's Medicare patients who died within 30 days of the admission that resulted in the last-occurring discharge of the patient in 1987. (The percentage is rounded to the nearest whole percentage point.)

Where, for example, Hospital A had a universe of 1000 patients whose last acute care hospital discharge in 1987 was from Hospital A, and 100 of these patients died within 30 days of their admission, whether as hospital inpatients or after discharge, the actual mortality rate would be 10 percent. This rate includes cases in which a beneficiary was admitted to the hospital in 1986 and was discharged in 1987. It also includes those instances in which a beneficiary was discharged in 1987 and died within 30 days of admission, even though the 30-day period extends into 1988. Cases in which the beneficiary was not discharged in 1987 are not part of the rate. For example, a person who was admitted to a hospital on December 28, 1987, discharged on January 5, 1988 and died on January 8, 1988 would not be a part of the calculation, even though that person died within 30 days of a 1987 admission.

o Range for Predicted Mortality. This column gives an estimate of mortality rates for cases equal in number and with the average characteristics of the cases treated by the hospital. The range is derived in part by determining, based on national experience, the contribution to the probability of dying associated with various patient characteristics: the number of high, low, and undefined risk hospital admissions in the previous six months, transfer status, age, sex, and presence of up to four of eight possible comorbid conditions--cancer, chronic cardiovascular disease, cerebrovascular degeneration/chronic psychosis, chronic pulmonary disease, chronic renal disease, chronic liver disease, diabetes, hypertensive disease--and by applying weights of the risk factors to the actual number of patients at the hospital to enable compilation of an expected mortality rate. This rate is converted, with adjustment for the variability expected given the number of cases, to a range of predicted mortality rates. It is important to note that the fewer the number of cases included in a given diagnostic category, the greater the uncertainty of the expected mortality range and, therefore, the wider the range. A larger number of cases yields greater precision, and therefore, a more narrow range of predicted mortality rates.

The principal source of data for the analysis was the HCFA Medicare Provider Analysis and Review (MEDPAR) file which contains information about each Medicare hospital discharge. Information about beneficiaries, including date of death, was obtained from the Social Security Administration.

The analyses were performed by means of logistic regression, with patients grouped into 17 distinct diagnostic categories: ten high risk and six low risk and one category containing all others. Similar to last year, the risk factors (covariates) included in the regression analyses within each diagnostic category were age, sex, significant comorbidities, number of admissions by risk category within 6 months, and status as a transfer patient. However, in response to comments on last year's definition of the diagnostic categories, the present categories are more risk-homogeneous. That is, the mortality rates associated with the ICD-9-CM codes for the principal diagnoses were evaluated and were used to determine whether a code should be placed in the high risk, the low risk, or the "undefined" category. Consequently, while the diagnostic categories still follow medical disciplinary lines, the range of mortality rates in each diagnostic category is more restricted. The net result is that the 16 specifically defined categories now account for about 65 percent of the patients, compared to 70 percent last year, and for about 72 percent of deaths, compared to 80 percent last year. A list of the ICD-9-CM codes used in each diagnostic category is attached in Table 2 and the list of the comorbidities is attached in Table 3. In the process of making these adjustments in the diagnostic categories, we have also modified the names of five categories to reflect more accurately their composition. These changes are: Neuropsychiatric/Sensory Disease (formerly Opthalmologic Disease), Musculoskeletal/Skin Conditions (formerly Orthopedic Disorders), Renal Failure (formerly Renal Disease), Infectious Disease (formerly Sepsis) and Cerebrovascular Accidents (formerly Stroke).

HOSPITAL COMMENTS

On September 15, 1988, HCFA mailed to each hospital its own mortality information and asked for comments by October 24, 1988. Each hospital's comments, if any, immediately follow its mortality information. The comments are generally reproduced as submitted by the hospital. However, some hospitals returned to HCFA an annotated copy of the information sent on September 15. These annotated materials have not been reproduced in this publication, even in those instances where they were the only form of comments submitted by a hospital. The reason for not printing these materials is one of privacy or because it would result in duplication of characteristics already corrected by HCFA. Information which would identify or possibly identify patients must be deleted, which would cause any remaining information to be of extremely limited, if any, use. Therefore, we have included a statement to identify instances when these types of materials have not been included. Other hospitals submitted comments that were more lengthy than those which we specified in our September 15 letter would be permitted and, therefore, were edited. As mentioned earlier, it is extremely important that the information presented in the tables be reviewed in concert with the hospital's comments.

In any project of this size, there will be instances where hospitals did not receive the information for comment or did not receive it timely. In fact, many hospitals were sent second copies of their specific information in an expeditious manner to allow every opportunity for review and comment. Therefore, even though it is possible that some of the nonresponding facilities never got the information or did not have adequate time to comment, we expect that these instances were few in number.

INFORMATION SOURCES AND NOTES

It is important to note that this publication is based primarily on Medicare hospital billing information for calendar years 1985, 1986, and 1987. While the principal source for the analysis was the HCFA-maintained MEDPAR file which contains information about each Medicare hospitalization, some of the information about beneficiaries, such as date of death, was obtained from the Social Security Administration. Hospitals submit such information to HCFA's fiscal intermediaries (which handle claims for the care provided to Medicare beneficiaries). The file is updated quarterly. It is estimated that billing information on approximately 95 percent of all Medicare discharges is included in the MEDPAR file within 6 months of the close of the calendar year. Accordingly, our analysis was based on information received through June 10, 1988.

In any large-scale data base such as one dealing with Medicare hospitalizations, there will be gaps or inaccuracies. The fact that the files contain information on about 10 million hospital admissions to nearly 6,000 hospitals for each year provides some assurance that, for purposes of the statistical analysis conducted here, the information which might be missing or inaccurate is such a small portion of the total that it would have almost no impact on the results.

Nonetheless, while we feel that the information used in this analysis is quite thorough and complete, there are a few points which should be kept in mind as the hospital-specific information is being reviewed:

- The information used is billing data and is only as good as the information submitted by hospitals as a part of the payment process. Although there is always a possibility that coding errors are included, for our purposes here, it is assumed that, given the link to payment, hospitals have an incentive to submit bills accurately and promptly.

- The hospitals included in this analysis are short-term, acute care facilities which were identified by their unique provider number. All facilities which have a zero in the third position of their provider number are by definition participating in Medicare as short-term, acute care facilities. All other facilities--those with something other than a zero in the third position of the provider number--were excluded from the analysis. In some cases, hospital names suggest an orientation different from acute care. This does not mean the facility is inappropriately included in the publication.

- There is some information in the file which does not reflect the results of review by Peer Review Organizations (PROs), the entities charged with reviewing hospital services provided to Medicare beneficiaries. For example, one of the functions a PRO performs is to ensure that the diagnosis assigned to a particular case is accurate. The nature of the review and payment system is such that it is possible that PRO changes in diagnosis assignment may not be submitted to HCFA and associated in the MEDPAR file on as timely a basis as other billing information. Obviously, any major changes in diagnosis assignment which are not reflected in the data base would have a bearing on calculation of mortality rates in individual diagnostic categories and may also have a bearing on comorbidities. Some hospitals pointed out instances where the hospital's mortality information did not agree with HCFA's; e.g., different date of death, cases of subsequent admission to another facility, or changes in diagnostic codes. The data base used in this analysis has not been revised to reflect these potential discrepancies. Rather, we are examining all hospital comments to ensure that changes to our data systems and processes can be made when warranted so that future releases will be even more accurate. Readers are urged to review any hospital comments with a specific view toward these types of issues.

- The predictive model used in this effort does not explain all variability in outcome. Most notably, a measure of severity of illness has not been included in the model, and, therefore, the predictive power of the model is less precise than it would be if such a measure had been available. Nonetheless, the information included in this document does legitimately contribute to the body of information about hospital performance.

HOSPITAL CHARACTERISTICS DEFINITIONS

In this year's publication, we have included hospital characteristics information such as bed size, occupancy rate, ownership, staffing, and specialty services. This information was obtained from the American Hospital Association (AHA) 1987 Annual Survey of Hospital Files. Where hospitals did not provide information on a particular item, it has been listed as "not available." This file consists of information voluntarily reported by hospitals to the AHA. In instances where the AHA records contained no information about a hospital included in the analysis, we have presented the most recent information from HCFA's Medicare/Medicaid Automated Certification System (MMACS) Files.

Following are the AHA's definitions of each characteristic found on the hospital's summary page containing the 1986 and 1987 mortality rates and ranges.

	SURVEY AND YEAR: AHA 1987	Source = American Hospital Association 1987 Annual Survey of Hospital Files
o	Total beds (#):	Number of beds (including sub-acute beds), cribs, and pediatric and neonatal bassinets regularly maintained (set up and staffed for use) for inpatients as of the close of the reporting period; does not include bassinets for normal newborn infants.
o	Occupancy rate (%):	Ratio of average daily census to the average number of beds (statistical beds) maintained during the 12-month reporting period. (NOTE: The number of these "statistical beds" may differ from the bed count at the close of the reporting period.)
o	Ownership/control:	State government, local government, district/authority, church, private nonprofit, private for profit, or Federal Government
	STAFFING:	
o	Total number of physicians:	Total active and associate medical staff
o	Percent of Board-Certified Specialists	Physicians who have passed an examination given by a medical specialty board and have been certified by that board as a specialist.
o	Interns and residents:	Full-time equivalent (FTE) medical residents
o	Registered nurses:	Full-time equivalent (FTE) registered nurses
o	Licensed practical nurses:	Full-time equivalent (FTE) licensed practical nurses

SPECIALTY SERVICES:

o Shock/trauma unit:	Provides emergency and specialized intensive care to critically injured patients.
o Burn unit:	Provides more intensive care to severely burned patients than the usual acute nursing care provided in medical and surgical units. Beds must be set up and staffed in a unit specifically designated for this service.
o Medical/surgical intensive care:	Provides nursing care to adult and/ or pediatric patients of a more intensive nature than the usual medical, surgical, pediatric, and/or psychiatric care on the basis of physicians' orders and approved nursing care plans. Included are medical-surgical, pediatric, and psychiatric (isolation) units. These units are staffed with specially trained nursing personnel and contain monitoring and specialized support equipment for patients who, because of shock, trauma, or life-threatening condi- tions, require intensified, compre- hensive observation and care. These units may also include cardiac care when such services are not provided in a distinct cardiac care unit.
o Cardiac intensive care:	Provides patient care of a more specialized nature than the usual medical and surgical care, on the basis of physicians' orders and approved nursing care plans. The unit is staffed with specially trained nursing personnel and contains monitoring and specialized support or treatment equipment for patients who, because of heart seizure, open-heart surgery, or other life-threatening conditions, require intensified, comprehensive observation and care. May include myocardial infarction, pulmonary care, and heart transplant units. Beds must be set up and staffed in a unit(s) specifically designated for this service.

o	Organ transplant service	The necessary staff and equipment to perform the surgical removal of a viable human organ (including kidney) from a donor, either alive or just deceased, and the surgical grafting of the organ to a suitably evaluated and prepared patient.
o	Hospice care:	A program providing palliative care, chiefly medical relief of pain and supportive services, to terminally ill patients and assistance to their families in adjusting to the patient's illness and death.

NOTE: Inquiries regarding the AHA data or requests for additional AHA data must be directed to the Director of the American Hospital Association's Hospital Data Center at (312) 280-6000.

Following are HCFA's Medicare/Medicaid Automated Certification System (MMACS) definitions of each characteristic found on the hospital's summary page containing the 1986 and 1987 mortality rates and ranges. Please note that there are no specific definitions of the specialty services in MMACS, and the characteristics that appear are those reported by the hospital.

SURVEY AND YEAR: HCFA 19_		Source = Health Care Financing Administration MMACS Files
o	Total beds (#):	Total number of operational beds eligible for Medicare reimbursement.
o	Ownership/control:	Church; private; Federal, State, local government, or hospital district or authority; proprietary.
STAFFING:		
o	Interns and residents:	Full-time equivalent (FTE) medical residents
o	Registered nurses:	Full-time equivalent (FTE) registered nurses
o	Licensed practical nurses:	Full-time equivalent (FTE) licensed practical nurses

- Organ transplant service: The necessary staff and equipment to perform the surgical removal of a viable human organ (including kidney) from a donor, either alive or just deceased, and the surgical grafting of the organ to a suitably evaluated and prepared patient.

- Hospice care: A program providing palliative care, chiefly medical relief of pain and supportive services, to terminally ill patients and assistance to their families in adjusting to the patient's illness and death.

Table 1

STATES BY REGION	LOCATION OF HCFA REGIONAL OFFICE
Connecticut Maine Massachusetts New Hampshire Rhode Island Vermont	Boston(I)
New Jersey New York Puerto Rico Virgin Islands	New York(II)
Delaware District of Columbia Maryland Pennsylvania Virginia West Virginia	Philadelphia(III)
Alabama Florida Georgia Kentucky Mississippi North Carolina South Carolina Tennessee	Atlanta(IV)
Illinois Indiana Michigan Minnesota Ohio Wisconsin	Chicago (V)
Arkansas Louisiana New Mexico Oklahoma Texas	Dallas (VI)

Table 1 (Cont.)

STATES BY REGION	LOCATION OF HCFA REGIONAL OFFICE
Iowa	Kansas City(VII)
Kansas	
Missouri	
Nebraska	
Colorado	Denver(VIII)
Montana	
North Dakota	
South Dakota	
Utah	
Wyoming	
American Samoa/Guam	San Francisco(IX)
Arizona	
California	
Hawaii	
Nevada	
Alaska	Seattle(X)
Idaho	
Oregon	
Washington	

Table 2

DIAGNOSTIC CATEGORY	ICD-9-CM CODES
High Risk	
Cancer	141, 147, 150-151, 156-159, 162.2-164, 171.5, 171.8, 171.9, 172.8, 179, 180.9 183, 189.0, 191, 192.2, 195, 196.1-196.2, 196.8, 197.0-197.2, 197.4-197.8, 198.0- 198.1, 198.3-198.8, 199-208
Cerebrovascular Accidents	430-432, 433.0, 434, 436
Severe Acute Heart Disease	410, 415, 421.0, 421.9, 423.0-423.2, 427.4-427.5, 441.0, 441.1, 441.3, 441.5, 444.1, 447.2, 785.5
Severe Chronic Heart Disease	397, 398.91, 416, 425.0, 425.2-425.4, 426.89, 428, 429.5-429.9, 441.2, 442.2, 453.2
Gastrointestinal Catastrophes	452, 453.0, 456.0, 456.20, 530.4, 530.8, 531.1-531.2, 531.5-531.6, 532.1-532.2, 532.5-532.6, 533.1-533.2, 533.5-533.6, 534.1-534.2, 534.5-534.6, 551, 557.0, 558.2, 560.0, 560.2, 560.89, 567, 569.83, 570, 571.2, 571.5-571.6, 572.2-572.4, 572.8
Metabolic/ Electrolyte Disorders	250.2-250.3, 260-263, 273, 275.4, 276.0, 276.2, 276.4-276.5, 277.3
Pulmonary Disease	481, 482.0-482.1, 482.3-482.9, 485-486, 500-505, 507, 508.0, 510, 511.1-511.9, 512-516.0, 518.0-518.1, 518.4, 518.5, 519.2-519.3
Renal Failure	584-586
Infectious Disease	018, 027.0, 036, 038, 040, 046-048, 049.0-049.1, 054, 060, 070.0, 070.2, 070.4, 070.6, 112, 116-117, 136.3, 320-320.7
Severe Trauma	806.0-806.1, 807.4, 851-853, 861.0-861.1, 861.3, 864, 868-869, 875.1, 901-902, 933.1, 934, 946.3-946.5, 948.4-948.9, 958.4

Table 2 (cont.)

DIAGNOSTIC CATEGORY	ICD-9-CM CODES
Low-Risk	
Neuropsychiatric/Sensory Disease	290-292, 293.1-293.9, 294-309, 311-319, 331.1-331.9, (excluding 331.7), 332-334 (excluding 334.4), 337 (excluding 337.1), 340, 342-343, 344.2-344.9, 345.0-345.2, 345.4-345.9, 346-347, 348.0, 350-358 (excluding 357.1-357.4 and 358.1), 360-389
Gynecologic Disease	614-627 (excluding 619.1)
Low-Risk Heart Disease	390, 393, 401, 402.00, 402.10, 402.90, 405, 411.1-411.8, 413-414, 417, 420.9, 422.9, 425.1, 426.1-426.7, 426.81, 427.0, 427.2-427.3, 427.6, 427.8-427.9, 429.4, 433.1-433.9, 435, 437.2, 442.0-442.1, 442.3-442.9, 447.0-447.1, 447.3-447.9, 448, 451, 453.1, 453.8-453.9, 454-455, 456.3-456.6, 457.0-457.1, 457.9, 458.0
Gastrointestinal Disease	520-527, 528.2, 528.4-528.9, 529, 530.0-530.3, 530.5-530.7, 530.9, 531.3, 531.7-531.9, 532.3, 532.7-532.9, 533.3, 533.7-533.9, 534.3, 534.7-534.9, 535-536, 537.1-537.2, 537.5-537.6, 537.81, 537.9, 540-543, 550, 552, 558.1, 558.9, 562-566, 568, 569.0-569.2, 569.4-569.6, 569.9, 571.8-571.9, 574.00, 574.10, 574.20, 574.30, 574.40, 574.50, 575.0-575.3, 575.5-575.6, 575.9, 576.0, 576.9, 577.1, 577.9, 579
Urologic Disease	582-583, 588-589, 590.1, 590.8-590.9, 592, 594-595, 596.0, 596.2-596.5, 596.7-596.9, 597-598, 599.1-599.9, 600-606, 607.0-607.1, 607.3-607.9, 608.0-608.3, 608.8-608.9

Table 2 (cont.)

DIAGNOSTIC CATEGORY	ICD-9-CM CODES
Musculoskeletal/Skin Conditions	680-686, 690-698, 700-706, 707.1-707.9, 708-709, 710.0, 710.2-710.9, 714.0-714.4, 714.89, 714.9, 715-744, 746-758, 800.0, 800.5, 801.0, 801.5, 802, 805, 806.2-806.9, 807.00-807.06, 807.1-807.3, 807.5-807.6, 808-819, 822-838, 839.1-839.9, 840-848, 850, 854.00-854.04, 854.06-854.09, 861.2, 862, 867.1, 867.3-867.9, 870-874, 875.0, 876-887, 890-897, 905-929

The number of digits in the code indicated is important in identifying the included diagnoses. If a 3 digit code is given, all diagnoses with the first three digits indicated are included. Thus, if there is a 4th and 5th digit subclassification for the code, diagnoses with these 4th and 5th digits are included.

If a 4 digit code is given, all diagnoses with the first four digits indicated are included. Additionally, if there is a 5th digit subclassification for the code, the diagnoses with the first four digits indicated and any of the 5th digits are included. Codes specified to the 5th digit were defined with greater clinical detail and include only that diagnosis.

Where a range of codes are specified (such as 290-292) all diagnoses through 292 are included. The rules for interpreting what is included in the 3 digit code of 292 are indicated above.

Table 3

COMORBIDITY	ICD-9-CM CODES
Cancer	141-160.9, 162-172.9, 174-208.9
Chronic Liver Disease	571-572.8
Chronic Renal Disease	582-583.9, 585-587
Chronic Cardiovascular Disease	412-414.9, 426-429.1
Chronic Pulmonary Disease	491-493.9, 496
Cerebrovascular Degeneration/ Chronic Psychosis	290-290.9, 294-299.9
Hypertensive Disease	402-405.99
Diabetes	250.01, 250.1-250.9

(A comorbidity is taken to be present if its ICD-9-CM code appears on the bill as any one of the up to four additional diagnoses beyond the principal diagnosis.)

BEEBE HOSP OF SUSSEX CNTY INC

424 SAVANNAH RD
LEWES, DE 19958

Medicare Hospital Provider Number: 080007

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,323	10	10 - 15	1,310	12	11 - 16
Cancer	30	50	21 - 58	37	62	27 - 61
Cerebrovascular Accidents	65	15	18 - 38	63	14	20 - 40
Gastrointestinal Catastrophes	14	14	11 - 54	7	43	8 - 73
Infectious Disease	21	24	18 - 57	26	50	21 - 61
Metabolic/Electrolyte Disorders	13	46	8 - 61	11	9	6 - 51
Pulmonary Disease	66	18	16 - 38	45	18	14 - 40
Renal Failure	14	36	16 - 74	14	36	19 - 77
Severe Acute Heart Disease	71	24	28 - 50	89	36	32 - 54
Severe Chronic Heart Disease	73	21	16 - 35	68	25	13 - 35
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	97	1	1 - 8	98	2	0 - 10
Gynecologic Disease	5	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	173	3	1 - 8	159	1	2 - 6
Musculoskeletal/Skin Conditions	93	1	0 - 9	73	3	0 - 14
Neuropsychiatric/Sensory Disease	22	0	0 - 35	32	0	0 - 66
Urologic Disease	40	0	1 - 14	36	6	0 - 77

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	124
Occupancy Rate (%):	81
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	72
Percent of Physicians Who Are Board Certified Specialists:	53
Interns and Residents:	0
Registered Nurses:	155
Licensed Practical Nurses:	25

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Beebe Hospital
OF SUSSEX COUNTY, INC.
LEWES, DELAWARE 19958
TELEPHONE (302) 645-3300

JAMES A. BALL
ADMINISTRATOR

RE: Medicare Mortality Data
Beebe Medical Center
Provider # 080007

October 20, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We appreciate the oportunity to present our views on the 1987 mortality rates for our hospital, especially in light of the following factors.

The 65+ age segment of Sussex County's population is growing 3.3 times as fast as the county adult population as a whole.

Our patient days for patients 65+ average between 50 and 60% of total patient days in any given month.

Our reimbursement from Medicare accounted for 52% of our total operating income in 1987.

As a result, we serve an above average proportion of patients covered by Medicare.

With this as background, our mortality data reveals that:

1) Our mortality rate has declined from 1986 to 1987, even though we saw slightly more patients.

2) Our mortality data was at the lower end of the "range of predicted mortality" for 15 of the 17 diagnosis caategories and this represented over 97% of our Medicare cases. The other 3% were still within the predicted range and in no case was the range exceeded.

3) Patients aged 70+ accounted for 69% of deaths in 1986 and 66% in 1987.

We should also point out that while your data shows "no Hospice" and "no Trauma or Burn Unit", as a rural hospital, with the next hospital 20 miles away, we accept all patients and the vast majority of cases receive all of their inpatient treatment here.

Our data would be even more favorable if we were able to include our high psychiatric population covered by Medicare in your analysis.

Your records should also reflect that we do participate with a hospice program and an organ donor program.

We agree with you that mortality data is useful yet definitely limited as information by itself to make judgements about the quality of care. We think that mortality rates are more meaningful if it reflects severity of illness.

We continue to provide high quality medical and nursing care to every patient that enters Beebe and are commited to that goal as our primary objective in the future.

James A. Ball
Administrator

David L. Schafer, M.D.
President of the Medical Staff

JAB/kwp

KENT GENERAL HOSP INC

640 S STATE STREET
DOVER, DE 19901

Medicare Hospital Provider Number: 080004

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,711	14	10 - 15	1,662	16	11 - 16
Cancer	66	39	24 - 51	67	40	26 - 53
Cerebrovascular Accidents	58	17	16 - 37	69	20	17 - 37
Gastrointestinal Catastrophes	15	27	15 - 62	18	50	16 - 63
Infectious Disease	41	54	21 - 54	39	33	19 - 52
Metabolic/Electrolyte Disorders	18	11	9 - 46	16	19	6 - 50
Pulmonary Disease	134	29	17 - 35	113	35	16 - 37
Renal Failure	15	33	14 - 71	15	53	15 - 74
Severe Acute Heart Disease	80	52	27 - 51	101	47	28 - 49
Severe Chronic Heart Disease	71	25	14 - 35	64	23	15 - 38
Severe Trauma	2	0	1 - 90	4	25	3 - 81
Gastrointestinal Disease	107	2	1 - 9	106	7	0 - 18
Gynecologic Disease	18	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	197	3	2 - 7	184	4	1 - 9
Musculoskeletal/Skin Conditions	135	4	0 - 11	125	3	0 - 13
Neuropsychiatric/Sensory Disease	28	4	0 - 88	38	3	1 - 20
Urologic Disease	121	1	0 - 18	121	2	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 180
Occupancy Rate (%): 80
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 74
Percent of Physicians Who Are Board Certified Specialists: 78
Interns and Residents: 0
Registered Nurses: 273
Licensed Practical Nurses: 59

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

KENT GENERAL

Delaware's [illegible] Health Care Center

Medicare Provider #080004

H.C.F.A. MORTALITY DATA RESPONSE

Kent General Hospital, having provided high quality and advanced care to Central Delaware and portions of Eastern Maryland since 1927, welcomes the opportunity to respond to the 1987 mortality data released by the Health Care Financing Administration (HCFA) on September 15, 1988. We agree with efforts to measure quality and will always assist meaningful approaches to do so. Similarly, we will challenge premature, inaccurate, or misleading approaches and methodologies.

First, we would like to address how the revised 1986 data reveals gross changes in the numbers of cases occurring within individual categories. Percentage changes are also significant, not only within the ranges, but with the actual mortality rate as well. Although we recognize and agree with the need for refining the methodology, once the data is published, and implied to reflect a certain level of quality, that data and any resulting criticisms are irretractable. We are proud of the quality of care we provide at Kent General, and still believe the publishing of data at this stage of the development of HCFA methodology is premature. Dr. Roper indicates that "...the information by itself is not a complete measure of quality of care...", and that "...we cannot and do not recommend the use of the information by itself to make judgements about the quality of care". Despite this clarification by Dr. Roper, the publication of such data leads the public none the less to believe that quality is in fact being measured.

On review, we have again found that the seriousness of the patient's condition on admission contributes significantly to the outcome. Your methodology does not address this. Other factors which are not addressed in your methodology are the stages of the patient's illness, the patient's psychological condition, and the family support. The HCFA study also fails to consider the resuscitation status of the patient immediately upon and shortly after admission. Some patients now have living wills. In other cases, families in consultation with the physician decide to allow the patient a dignified death.

Six of the diagnostic categories are represented by fewer that 30 cases each, and although well within range, such low volumes cannot be indicative of a quality standard. Save the Infectious Disease and Severe Acute Heart Disease categories which will be discussed, the remaining categories are well represented and within the stated ranges. A significant decrease in actual mortality for all causes is indeed encouraging. Ongoing 100% inpatient chart review coupled with other social and clinical services and physician interaction all contribute to the effective and quality care provided our patients.

A review of the infectious disease and severe acute heart disease categories reveals several discrepancies in the data. Full disclosure of discrepancies will not be made here as it is less important than the following:

a. Were the deaths "expected"? In many cases yes, due to the extreme ages coupled with the severity of illness upon and subsequent to the admission. These were some very sick people and are categorized as such by us.

b. It is interesting to note that given similar physician mix and treatment patterns as the high risk patients, low risk heart disease patient's mortality fell in the center of the predicted range. These patients were obviously less acutely ill.

One must recognize that these figures represent older Americans.

In performing an analysis of the Infectious Disease category, we found that the average age of all who were treated was 78.0 years. For all who were treated but died, 78.3 years, and for all who died within 30 days of admission, 79.5 years. The female/male split on the latter is 79.1 and 80.3 years respectively. Of note is the comparison to State and National average lifetime in years by sex. In Delaware, the average for female is 76.8 and for males, 69.6 years. Nationally they are 77.6 and 70.1 years respectively. Our patients clearly were older than would otherwise be expected.

Severe Acute Heart Disease must be recognized as an extreme episode of illness in the patient's life. The average age of this treated group was 74.5 years with all who died averaging 76.0 years. The average age for those who died within 30 days was 74.8 years. Again, the latter breaks out as follows: 79.7 years for females and 71.2 for males. This is not surprising given the National and Delaware statistics and that this is indeed an acute occurrence for the patient.

Kent General Hospital remains on the cutting edge in patient care. In doing so, it treats more acutely ill patients. Renal Dialysis, Radiation Therapy, Chemotherapy, Magnetic Resonance Imaging, a new Coronary Care Unit, and Laser Surgery are but a few of the services offered to our patients. It is also significant to note that Kent General works closely with the local Hospice group. Thirteen of those who died of cancer following discharge were participants in that program.

Yes, Kent General does treat patients who die within 30 days of admission. But many more, and indeed most, leave our facility to lead longer quality lives. Kent General is particularly responsive to those in the low risk categories listed, as these are areas where questionable deaths are a greater concern.

In closing, a noted health care author states and I quote, "Even if the actual consequences of care in any given instance prove to be disastrous, quality must be judged as good if care, at the time it was given, conformed to the practice that could have been expected to achieve the best results." (p. 1744) We at Kent General continually strive for the highest quality of care and best results possible.

Donabedian, Avedis (1988). "The Quality of Care: How Can It Be Assessed?" Journal of the American Medical Association. Vol. 260, No. 12, Sept. 23/30, p. 1743-1748.

MEDICAL CENTER OF DELAWARE

PO BOX 1668
WILMINGTON, DE 19899

Medicare Hospital Provider Number: 080001

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	6,143	12	11 - 14	6,096	13	11 - 15
Cancer	300	37	33 - 51	319	38	34 - 51
Cerebrovascular Accidents	241	21	19 - 32	220	24	19 - 33
Gastrointestinal Catastrophes	62	34	21 - 50	56	30	19 - 49
Infectious Disease	79	56	27 - 53	93	46	29 - 55
Metabolic/Electrolyte Disorders	81	25	16 - 42	92	32	16 - 42
Pulmonary Disease	244	26	18 - 34	251	20	17 - 32
Renal Failure	40	32	15 - 63	44	36	15 - 64
Severe Acute Heart Disease	288	35	31 - 45	274	39	30 - 45
Severe Chronic Heart Disease	309	26	16 - 28	288	22	18 - 30
Severe Trauma	12	42	8 - 63	24	21	9 - 49
Gastrointestinal Disease	395	4	1 - 6	417	5	1 - 7
Gynecologic Disease	68	0	0 - 87	73	0	0 - 37
Low-Risk Heart Disease	847	4	2 - 5	714	4	2 - 6
Musculoskeletal/Skin Conditions	466	3	1 - 5	547	3	1 - 5
Neuropsychiatric/Sensory Disease	247	2	1 - 6	313	2	0 - 6
Urologic Disease	251	2	0 - 8	195	1	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 949
Occupancy Rate (%): 80
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 822
Percent of Physicians Who Are Board Certified Specialists: 61
Interns and Residents: 166
Registered Nurses: 1,304
Licensed Practical Nurses: 217

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

Christiana Hospital

MEDICAL CENTER OF DELAWARE

4755 Stanton Ogletown Road
P.O. Box 6001
Newark, Delaware
19718

302 733 1000

October 21, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
P. O. Box 26684
Baltimore, MD 21207

Dear Dr. Roper:

Thank you for the opportunity to respond to the release of hospital-specific mortality data for Medicare patients cared for by us during 1987. The medical Center of Delaware is an 1100-bed Medical Center comprised of three hospitals. It is the largest provider of health care in the state and serves as a regional referral center for patients from Delaware, Maryland, New Jersey, and Pennsylvania. We are a tertiary care facility providing care for patients that local hospitals cannot provide.

The physicians and Administration of the Medical Center are committed to delivering quality care to our patients. To insure this, the Medical Center has a comprehensive quality assurance program which involves all Medical/Dental and professional departments. All patients' charts are screened to insure that the appropriate level of care is provided. If a quality issue is identified, corrective action is quickly implemented and monitored.

The Medical Center's mortality rate exceeded predicted ranges in one category, infectious disease. Medicare's data indicated there were 44 deaths in this category. Our review found 41 deaths. There is one coding error, one patient died greater than 30 days after their last admission and we had no record of one patient's admission. These corrections give the Medical Center an adjusted mortality rate for infectious disease of 52%, which is within the predicted range. We feel this exercise is an example of the proper way to use HCFA's data; that is, as a screening tool and not as an infallible indicator of high or low quality.

We welcome HCFA's attempt to define quality recognizing that it represents a start in developing more sophisticated measurement tool.

The data published by HCFA has been reviewed by members of the Medical/Dental and Administrative Staffs of the Medical Center of Delaware. We will continue to monitor all of our patients to insure the care they receive is at the appropriate level and type. As health care institutions continue to redefine the way we measure quality we will incorporate new tools into our review process.

We thank the Health Care and Finance Administration for the opportunity to provide this response.

Sincerely yours,

Allen L. Johnson
President and Chief Executive Officer

MILFORD MEMORIAL HOSPITAL INC

CLARKE AVENUE
MILFORD, DE 19963

Medicare Hospital Provider Number: 080002

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,380	13	9 - 14	1,340	14	9 - 14
Cancer	33	61	31 - 66	35	57	30 - 64
Cerebrovascular Accidents	67	21	15 - 36	49	24	15 - 41
Gastrointestinal Catastrophes	7	14	8 - 66	8	38	11 - 72
Infectious Disease	20	25	15 - 55	23	39	18 - 59
Metabolic/Electrolyte Disorders	9	33	5 - 65	21	24	8 - 48
Pulmonary Disease	82	28	14 - 36	86	28	14 - 36
Renal Failure	4	0	3 - 75	8	38	15 - 81
Severe Acute Heart Disease	68	40	26 - 51	55	38	27 - 53
Severe Chronic Heart Disease	98	26	15 - 33	66	24	14 - 36
Severe Trauma	1	0	2 - 97	1	0	0 - 99
Gastrointestinal Disease	124	2	1 - 9	90	3	0 - 14
Gynecologic Disease	5	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	181	5	1 - 9	174	5	1 - 10
Musculoskeletal/Skin Conditions	124	3	0 - 12	116	3	0 - 13
Neuropsychiatric/Sensory Disease	35	0	0 - 34	26	8	0 - 64
Urologic Disease	69	1	0 - 34	71	0	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	139
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	49
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	134
Licensed Practical Nurses:	32

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NANTICOKE MEMORIAL HOSP INC

801 MIDDLEFORD RD
SEAFORD, DE 19973

Medicare Hospital Provider Number: 080006

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,073	12	9 - 14	1,121	15	11 - 16
Cancer	30	43	29 - 65	30	50	29 - 66
Cerebrovascular Accidents	48	33	15 - 42	45	40	18 - 47
Gastrointestinal Catastrophes	6	33	10 - 76	10	50	7 - 66
Infectious Disease	8	25	10 - 68	13	38	20 - 71
Metabolic/Electrolyte Disorders	27	30	8 - 46	41	24	10 - 42
Pulmonary Disease	55	31	14 - 41	57	33	14 - 40
Renal Failure	2	100	6 - 90	8	63	15 - 81
Severe Acute Heart Disease	49	33	25 - 53	62	44	27 - 53
Severe Chronic Heart Disease	49	20	10 - 34	51	29	14 - 40
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	97	2	1 - 10	102	4	1 - 12
Gynecologic Disease	7	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	176	4	1 - 8	175	3	1 - 8
Musculoskeletal/Skin Conditions	81	2	0 - 13	74	1	0 - 12
Neuropsychiatric/Sensory Disease	44	5	1 - 22	26	8	0 - 87
Urologic Disease	29	0	0 - 65	41	2	0 - 46

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	119
Occupancy Rate (%):	68
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	49
Percent of Physicians Who Are Board Certified Specialists:	43
Interns and Residents:	0
Registered Nurses:	116
Licensed Practical Nurses:	35

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

RIVERSIDE HOSP

LEA BLVD FRANKLIN PL
WILMINGTON, DE 19802

Medicare Hospital Provider Number: 080005

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	441	11	7 - 14	482	9	7 - 13
Cancer	9	22	16 - 70	7	14	10 - 67
Cerebrovascular Accidents	25	16	12 - 43	14	21	9 - 53
Gastrointestinal Catastrophes	3	0	1 - 82	9	44	10 - 70
Infectious Disease	7	57	4 - 71	5	0	9 - 66
Metabolic/Electrolyte Disorders	10	50	7 - 65	13	15	8 - 53
Pulmonary Disease	20	10	7 - 39	18	11	11 - 45
Renal Failure	4	75	9 - 85	3	67	8 - 90
Severe Acute Heart Disease	21	38	13 - 54	15	27	15 - 59
Severe Chronic Heart Disease	26	0	12 - 28	31	19	10 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	24	0	0 - 28	37	5	0 - 63
Gynecologic Disease	3	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	69	4	0 - 18	75	1	1 - 10
Musculoskeletal/Skin Conditions	43	0	0 - 22	67	0	0 - 9
Neuropsychiatric/Sensory Disease	16	0	0 -100	25	4	0 - 77
Urologic Disease	9	0	0 -100	11	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	75
Occupancy Rate (%):	48
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	189
Percent of Physicians Who Are Board Certified Specialists:	46
Interns and Residents:	9
Registered Nurses:	66
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST FRANCIS HOSP INC

7TH CLAYTON STS
WILMINGTON, DE 19805

Medicare Hospital Provider Number: 080003

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,111	10	9 - 13	3,084	11	9 - 13
Cancer	77	42	29 - 55	83	42	26 - 52
Cerebrovascular Accidents	117	21	18 - 35	126	29	18 - 35
Gastrointestinal Catastrophes	23	52	21 - 63	23	30	20 - 60
Infectious Disease	40	35	17 - 49	20	60	18 - 62
Metabolic/Electrolyte Disorders	46	28	11 - 42	52	17	13 - 40
Pulmonary Disease	124	18	15 - 32	137	9	16 - 31
Renal Failure	25	40	16 - 68	18	28	17 - 72
Severe Acute Heart Disease	103	38	27 - 48	139	31	28 - 46
Severe Chronic Heart Disease	191	23	16 - 30	187	21	15 - 29
Severe Trauma	3	67	6 - 87	3	33	1 - 91
Gastrointestinal Disease	257	2	1 - 6	284	2	1 - 6
Gynecologic Disease	39	0	0 - 23	31	3	0 -100
Low-Risk Heart Disease	347	3	1 - 6	367	2	1 - 5
Musculoskeletal/Skin Conditions	326	3	0 - 6	323	2	1 - 6
Neuropsychiatric/Sensory Disease	51	0	0 - 13	83	2	0 - 22
Urologic Disease	161	1	0 - 7	134	2	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	327
Occupancy Rate (%):	69
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	447
Percent of Physicians Who Are Board Certified Specialists:	55
Interns and Residents:	13
Registered Nurses:	311
Licensed Practical Nurses:	59

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

St. Francis Hospital
Seventh and Clayton Streets
Wilmington, Delaware 19805

Office of President

October 21, 1988

William L. Roper, M.D.
Administrator
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

HCFA Mortality Data Release
Medicare No. 080003

Dear Dr. Roper:

St. Francis Hospital welcomes the opportunity to comment on the Health Care Financing Administration's mortality information planned for release in December, 1988.

As regards the hospital's specific information, your data indicates, as well as it is our belief, that St. Francis Hospital is experiencing a lower than average mortality rate in the designated categories. We are below the midpoint of the range in twelve of the sixteen diagnostic categories and do not exceed the predicted mortality range in any of the categories in the study. The overall mortality rate for all cases indicates that St. Francis Hospital is at the low end of the range.

In comparison with the 1986 data, our overall mortality rates reflects no appreciable change from one year to the next. The 1987 diagnostic categories demonstrating an increase in mortality over 1986 are attributed to the increased severity of illness in our patient population. Our analysis of this data indicates that patients in these diagnostic categories are typically patients with chronic long standing illnesses admitted to the hospital in the terminal stages of their disease processes.

Regarding the accuracy of the mortality data, your data indicates that of the 391 deaths of patients and former patients of St. Francis Hospital, 42 deaths occurred post discharge. Our hospital records indicate that 38 were post discharge deaths while the other 4 deaths occurred while still a patient (refer to attachment 1). It is our concern that the inclusion of post discharge deaths skew the hospital's mortality rate because it is possible that the patients may have died of causes unrelated to their admission.

Upon review of the 38 post discharge deaths 14 were discharged to an extended care facility and 11 to a home health program. All cases were reviewed by the hospital's Professional Activities Committee and PRO and were found to be medically appropriate discharges to the next level of care.

Our concern relating to the inclusion of Hospital Characteristics as a component of the Medicare Mortality Data Release is that the staff to bed statistics may be misinterpreted to draw inaccurate conclusions about the quality of patient care. The hospital characteristics presented in your summary contains several errors. (Please refer to Attachment 2 for corrected figures as reported in the 1986 AHA Annual Survey of Hospitals.)

St. Francis Hospital has always been known for its quality of care. The Medicare beneficiaries we serve affirm our dedication to them as they select us to be their hospital of choice in numbers clearly higher than a hospital of our size in our community would ever expect. We feel privileged to care for them in all stages of their life.

Again, we appreciate the opportunity to review and comment on the HCFA Mortality Data prior to its public release.

Respectfully yours,

Paul C King, Jr.

Paul C. King, Jr.
President

PCK/ami
Attachment

CAPITOL HILL HOSP

800 CONSTITUTION AVE NE
WASHINGTON, DC 20002

Medicare Hospital Provider Number: 090009

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,378	12	9 - 13	1,423	10	8 - 13
Cancer	33	45	23 - 59	28	32	24 - 60
Cerebrovascular Accidents	49	24	13 - 38	47	15	15 - 37
Gastrointestinal Catastrophes	8	38	7 - 69	14	50	15 - 66
Infectious Disease	19	26	17 - 58	13	31	12 - 62
Metabolic/Electrolyte Disorders	49	35	11 - 43	35	34	11 - 46
Pulmonary Disease	63	30	15 - 40	67	24	15 - 38
Renal Failure	3	33	1 - 88	10	20	11 - 71
Severe Acute Heart Disease	35	51	19 - 52	36	39	23 - 56
Severe Chronic Heart Disease	100	11	13 - 28	84	8	14 - 28
Severe Trauma	2	0	4 - 89	1	0	1 - 97
Gastrointestinal Disease	85	7	1 - 17	90	3	1 - 12
Gynecologic Disease	4	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	180	3	1 - 8	182	4	1 - 9
Musculoskeletal/Skin Conditions	123	4	0 - 12	108	2	0 - 10
Neuropsychiatric/Sensory Disease	43	7	0 - 33	61	3	0 - 20
Urologic Disease	37	5	0 - 94	68	4	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	250
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	129
Percent of Physicians Who Are Board Certified Specialists:	61
Interns and Residents:	0
Registered Nurses:	149
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CAPITOL
HILL
HOSPITAL
700 Constitution Avenue, N.E.
Washington, D.C. 20002
(202) 269-8000

Hospital ID: 090009

October 10, 1988

William L. Roper, M.D.
The Administrator.
Health Care Financing Administration
Department of Health and Human Services
Washington, D.C. 20201

Dear Dr. Roper:

We appreciate the opportunity to review the HCFA Mortality Data prior to publication. Our initial verification process indicates that the accuracy of the 1987 patient data is greatly improved over previous years. The errors found this year relate primarily to incorrect patient numbers and do not in any way effect the statistical interpretation of the data. However, there are several errors in the hospital characteristics data provided by AHA. We have requested that AHA make the necessary corrections to their database, as enclosed.

As previously recommended, we intend to use the HCFA Mortality Data for 1987 as a tool in our peer review and quality assurance process. The availability of Medicare Mortality Predictor System (MMPS), is a positive step towards making the data more useful. This program allows us the opportunity to validate the current severity of illness system we already employ and greatly strengthens our confidence in such measurement systems. We encourage HCFA to expand the application of MMPS to the remaining 14 categories as soon as possible.

Cordially yours,

Bill Haire

Bill Haire, President and CEO

enclosure

Member of the Medlantic Healthcare Group

COLUMBIA HOSP FOR WOMEN

2425 L ST NW
WASHINGTON, DC 20037

Medicare Hospital Provider Number: 090010

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	58	5	2 - 17	65	0	1 - 9
Cancer	4	25	5 - 80	4	0	3 - 71
Cerebrovascular Accidents	1	100	0 - 99	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	1	0	3 - 98	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	4	25	0 -100	5	0	0 -100
Gynecologic Disease	17	0	0 -100	18	0	0 -100
Low-Risk Heart Disease	1	0	0 -100	1	0	0 -100
Musculoskeletal/Skin Conditions	1	0	0 -100	1	0	0 -100
Neuropsychiatric/Sensory Disease	1	0	0 -100	0	-	-
Urologic Disease	3	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	189
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	157
Percent of Physicians Who Are Board Certified Specialists:	89
Interns and Residents:	0
Registered Nurses:	273
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DISTRICT OF COLUMBIA GEN HOSP

19TH E STS SE
WASHINGTON , DC 20003

Medicare Hospital Provider Number: 090007

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	817	18	9 - 15	828	16	8 - 14
Cancer	25	48	18 - 58	24	54	21 - 61
Cerebrovascular Accidents	44	34	10 - 39	34	21	11 - 40
Gastrointestinal Catastrophes	6	50	8 - 76	6	0	5 - 59
Infectious Disease	26	46	18 - 57	12	67	13 - 65
Metabolic/Electrolyte Disorders	28	21	8 - 44	33	36	5 - 43
Pulmonary Disease	30	40	9 - 45	27	33	5 - 44
Renal Failure	10	40	9 - 73	7	0	11 - 68
Severe Acute Heart Disease	34	56	22 - 56	22	41	19 - 59
Severe Chronic Heart Disease	50	24	8 - 34	50	16	10 - 32
Severe Trauma	3	0	1 - 84	3	33	1 - 91
Gastrointestinal Disease	32	9	0 - 50	32	9	0 - 47
Gynecologic Disease	1	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	93	5	1 - 14	113	8	1 - 15
Musculoskeletal/Skin Conditions	44	2	0 - 85	45	4	0 - 79
Neuropsychiatric/Sensory Disease	46	4	0 - 34	45	0	0 - 13
Urologic Disease	30	3	0 -100	29	0	0 - 79

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	394
Occupancy Rate (%):	74
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	304
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	176
Registered Nurses:	369
Licensed Practical Nurses:	81

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Government of the District of Columbia
District of Columbia General Hospital
19th Street and Massachusetts Avenue, S.E.
Washington, D.C. 20003
Telephone (202) 675-5000

October 24, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Hubert Humphry Building Room #309
2000 Indiana Avenue, S.W.
Washington, D.C. 20201

Dear Dr. Roper:

We thank you for the opportunity to respond to the release of data on Medicare mortality rates at D. C. General Hospital during 1987.

We are encouraged by the fact that you have begun to apply, in some degree, a severity of illness abstraction screen to four of the diagnostic categories. Hopefully, all categories will eventually reflect application of severity of illness systems and the data published for public information will reflect an interpretation consistent with these findings.

Using the raw data, namely number of cases and number of deaths, the actual mortality rate for D. C. General Hospital was calculated as 18% which is 3% above the predicted range of 9-15%. Significant however is the fact that D. C. General Hospital placed within the individual predicted ranges for all diagnostic categories.

We believe that the difference between the observed and predicted percentage ranges does include unmeasured risk factors and unpredicted variations in outcomes. Your application of the Medicare Mortality Predictor System to four major categories of D. C. General Hospital patients seem to bear out our beliefs for, after abstraction the actual mortality rate of D. C. General Hospital patients within these categories was decreased significantly.

The Quality Assurance Office, with the assistance of physician staff, has conducted a detailed medical records review of all cases in the sixteen diagnostic categories, focusing on those whose actual mortality rate fell at the high end of the predicted range.

Coincidentally, these were Pulmonary Diseases, Cerebravascular Accident, Severe Acute Heart Disease and Severe Chronic Heart Disease, the specific diagnoses which HCFA has indicated accounts for eight percent of Medicare discharges yet represent almost a third of hospital associated Medicare Mortalities.

The number of patients in the four designated major categories was 158, accounting for 19% admission which is greater than one eighth of Medicare discharges for D. C. General Hosptial. There were fifty eight (58) registered deaths in these categories, which is 38% of the Medicare Mortality. Again greater than a third which is the national norm indicted by HCFA.

D. C. General Hospital is a public hospital whose mission is to provide medical care to every District of Columbia resident regardless of his ability to pay. The majority of our patients are acute care admission through the Emergency Care Center. These patients are generally higher risk patients because of prevailing unmeasured factors.

Further analysis of the data revealed:

1. Of the 15 deaths due to strokes, 8 patients were over 70 years of age. The average age was 78.5 years. Of the 12 deaths attributed to congestive heart failure, 9 patients were over 70 years of age. The average age was 81.5 years. Fourteen of the 19 patients who expired of myocardial infarction were over 70 years of age. The average age was 79.2 years.

2. With the exception of one patient who was admitted through the clinic, all the patients who expired were admitted through the Emergency Room. Four patients were St. Elizabeths' residents, and three patients came from Nursing Homes. Eleven patients had had private physicians who were not affiliated at D. C. General Hospital.

The review of all mortalities, a function of the Quality Assurance Program, is an ongoing monthly process conducted by the physician staff at D. C. General Hospital. This form of review, as well as the process conducted at this time, uses physician determined standards of appropriateness of care. Through such a review we seek to monitor delivery of high quality care and identify opportunities to improve care.

In conclusion, the record analysis revealed an important discovery. This revelation was not surprising however. As HCFA applied the Medicare Mortality Predictor System to the four major diagnostic categories, the abstraction factor produced data sets comparable to D. C. General Hospital physician review findings.

When severity of illness and other risk factors are applied, the actual mortality rate is better interpreted with consideration in light of the expected mortality. Clearly, the majority of the inpatients admitted these categories were so ill when they were admitted, that death was an expected outcome.

We applaud the use of systems by HCFA which allow for demonstration of difference in patient populations that have a decided influence on outcomes. It is hoped that in the future such an application will be made to all categories and that data presentation for public information will qualify numbers based upon the adjusted rates.

Sincerely,
Lawrence S Johnson M.D. for
John Dandridge, Jr.
Executive Director

GEORGE WASHINGTON UNIV HOSP

901 23RD ST NW
WASHINGTON, DC 20037

Medicare Hospital Provider Number: 090001

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,052	11	10 - 14	2,020	9	9 - 13
Cancer	107	28	28 - 50	104	32	28 - 51
Cerebrovascular Accidents	65	38	15 - 40	52	12	16 - 35
Gastrointestinal Catastrophes	15	27	17 - 63	21	24	20 - 60
Infectious Disease	25	48	17 - 57	11	55	12 - 67
Metabolic/Electrolyte Disorders	39	23	14 - 46	38	24	12 - 45
Pulmonary Disease	65	26	15 - 39	70	24	17 - 39
Renal Failure	12	25	6 - 66	11	27	7 - 69
Severe Acute Heart Disease	67	30	27 - 51	55	31	28 - 54
Severe Chronic Heart Disease	85	14	16 - 32	90	11	15 - 30
Severe Trauma	1	0	1 - 97	4	0	4 - 72
Gastrointestinal Disease	96	4	1 - 12	103	5	1 - 13
Gynecologic Disease	15	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	195	3	1 - 7	212	1	2 - 6
Musculoskeletal/Skin Conditions	211	2	1 - 6	225	2	1 - 6
Neuropsychiatric/Sensory Disease	85	4	0 - 16	116	3	0 - 12
Urologic Disease	73	1	0 - 13	75	1	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	501
Occupancy Rate (%):	74
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	910
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	306
Registered Nurses:	558
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

GEORGETOWN UNIV HOSP

3800 RESERVIOR RD
WASHINGTON , DC 20007

Medicare Hospital Provider Number: 090004

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,690	8	9 - 13	2,609	9	9 - 13
Cancer	109	28	30 - 52	124	32	31 - 52
Cerebrovascular Accidents	85	19	17 - 36	62	18	16 - 37
Gastrointestinal Catastrophes	12	25	10 - 60	19	16	15 - 53
Infectious Disease	23	26	19 - 57	14	36	18 - 67
Metabolic/Electrolyte Disorders	40	38	16 - 50	33	27	15 - 50
Pulmonary Disease	94	23	17 - 37	86	19	16 - 36
Renal Failure	15	27	7 - 64	9	11	6 - 66
Severe Acute Heart Disease	74	23	27 - 48	91	30	29 - 50
Severe Chronic Heart Disease	105	18	15 - 32	88	18	15 - 33
Severe Trauma	2	0	0 - 92	4	0	8 - 73
Gastrointestinal Disease	92	4	1 - 13	98	3	2 - 11
Gynecologic Disease	22	0	0 -100	23	0	0 - 95
Low-Risk Heart Disease	417	2	2 - 6	395	5	2 - 7
Musculoskeletal/Skin Conditions	238	2	1 - 6	217	2	1 - 6
Neuropsychiatric/Sensory Disease	174	2	0 - 8	169	1	1 - 7
Urologic Disease	187	0	0 - 6	158	0	0 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	526
Occupancy Rate (%):	76
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	275
Percent of Physicians Who Are Board Certified Specialists:	94
Interns and Residents:	163
Registered Nurses:	626
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

Provider #: 090004

GEORGETOWN UNIVERSITY HOSPITAL

COMMENTS RELATED TO HCFA'S MEDICARE MORTALITY RATES (1987)

Georgetown University Hospital appreciates HCFA's endeavors and their acknowledgement of the limitations of their mortality data. We support the need for developing and refining methodologies to measure quality of care. Although mortality data is not a precise measure of quality, our low actual experience compared with predicted range should be viewed as positive.

Georgetown University Hospital has an ongoing Quality Assurance Program which encompasses all of the Joint Commission on Accreditation of Health Care Organizations recommendations for quality assurance activity. Specific criteria are used to monitor the appropriateness of patient care and services on a concurrent as well as retrospective basis. The analysis of this information enables us to correct identified problems and implement strategies to improve patient care.

GREATER SE HOSP

1310 SOUTHERN AVE SE
WASHINGTON , DC 20032

Medicare Hospital Provider Number: 090008

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,738	12	10 - 15	1,613	11	10 - 15
Cancer	54	48	25 - 55	42	36	28 - 59
Cerebrovascular Accidents	74	26	18 - 39	62	37	17 - 42
Gastrointestinal Catastrophes	14	50	13 - 64	10	20	13 - 65
Infectious Disease	25	40	19 - 58	24	38	18 - 58
Metabolic/Electrolyte Disorders	45	18	13 - 42	49	24	12 - 41
Pulmonary Disease	81	31	18 - 40	75	29	19 - 42
Renal Failure	11	18	14 - 71	15	7	11 - 61
Severe Acute Heart Disease	41	41	26 - 57	46	39	22 - 51
Severe Chronic Heart Disease	90	20	16 - 34	87	26	15 - 35
Severe Trauma	4	25	2 - 82	1	0	0 - 99
Gastrointestinal Disease	98	4	1 - 12	57	0	2 - 10
Gynecologic Disease	10	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	204	2	2 - 7	192	4	2 - 8
Musculoskeletal/Skin Conditions	152	2	1 - 7	136	2	1 - 8
Neuropsychiatric/Sensory Disease	40	2	0 - 30	59	0	0 - 13
Urologic Disease	85	6	0 - 17	74	4	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	460
Occupancy Rate (%):	80
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	456
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	233
Licensed Practical Nurses:	29

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Greater Southeast Community Hospital
1310 Southern Avenue, Southeast
Washington, DC 20032
(202) 574-6000

Thomas W. Chapman
President

October 20, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

Greater Southeast Community Hospital appreciates the opportunity to review and comment on the HCFA Mortality Data scheduled for release in December 1988.

In our review of the patient-specific data you provided, we found no serious inaccuracies. While we applaud your efforts to account for severity measures this year, we feel further attempts are needed to improve the system and to validate the other data.

We did find some inaccurate data in the Hospital Characteristics section. Listed below are the correct numbers based on AHA surveys.

	1986	1987
Occupancy Rate (%):	88	83
Staffing:		
Percent of Physicians who are Board Certified Specialists:	89	89
Interns and Residents Per Bed:	.08	.08
Registered Nurses Per Bed:	.86	.66
Licensed Practical Nurses Per Bed:	.08	.08
Specialty Services:		
Shock/Trauma or Burn Unit	Yes	No
Coronary Care Unit	Yes	Yes
Organ Transplant Service	No	No

Greater Southeast Community Hospital is committed to providing quality health care and to reviewing its standards through quality assurance programs. However, HCFA needs to improve communications with the public so that the Medicare data is not used to make judgements about the quality of care in a hospital or to make comparisons among hospitals.

Should you have any questions about this data, please do not hesitate to call us.

Sincerely,

Thomas W. Chapman
President

cc: Hospital Board of Directors
Chairman, Executive Committee of Medical Staff
President, D.C. Hospital Association
Chairman, Quality Assurance Committee

HADLEY MEMORIAL HOSP

4601 NICHOLS AVE SW
WASHINGTON, DC 20032

Medicare Hospital Provider Number: 090002

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	335	11	8 - 16	286	14	7 - 16
Cancer	5	40	13 - 83	4	50	8 - 84
Cerebrovascular Accidents	9	11	8 - 56	8	13	8 - 60
Gastrointestinal Catastrophes	6	17	8 - 71	0	-	-
Infectious Disease	6	33	13 - 79	6	50	10 - 77
Metabolic/Electrolyte Disorders	6	33	8 - 75	10	50	8 - 66
Pulmonary Disease	19	32	12 - 54	25	24	7 - 43
Renal Failure	2	50	2 - 92	2	50	8 - 98
Severe Acute Heart Disease	10	50	13 - 69	4	50	9 - 85
Severe Chronic Heart Disease	25	12	8 - 37	18	6	8 - 37
Severe Trauma	1	0	2 - 98	0	-	-
Gastrointestinal Disease	20	0	0 - 73	16	6	0 - 95
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	38	3	0 - 23	41	2	0 - 23
Musculoskeletal/Skin Conditions	30	3	0 - 31	37	8	0 - 84
Neuropsychiatric/Sensory Disease	5	0	0 -100	1	0	0 -100
Urologic Disease	15	0	0 -100	8	25	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	81
Occupancy Rate (%):	67
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	60
Percent of Physicians Who Are Board Certified Specialists:	90
Interns and Residents:	0
Registered Nurses:	100
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HOWARD UNIVERSITY HOSPITAL

2041 GEORGIA AVE NW
WASHINGTON , DC 20060

Medicare Hospital Provider Number: 090003

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,627	13	11 - 16	1,558	11	10 - 15
Cancer	75	45	32 - 58	78	42	32 - 58
Cerebrovascular Accidents	62	19	15 - 36	58	14	16 - 36
Gastrointestinal Catastrophes	11	18	13 - 62	14	43	12 - 63
Infectious Disease	39	49	16 - 50	32	34	17 - 52
Metabolic/Electrolyte Disorders	68	25	15 - 42	30	7	10 - 38
Pulmonary Disease	87	26	17 - 38	75	27	15 - 38
Renal Failure	17	24	10 - 64	14	29	11 - 69
Severe Acute Heart Disease	56	45	28 - 55	45	33	27 - 55
Severe Chronic Heart Disease	96	11	14 - 29	103	17	13 - 30
Severe Trauma	2	50	1 - 94	3	33	1 - 89
Gastrointestinal Disease	77	1	1 - 10	84	1	1 - 9
Gynecologic Disease	6	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	176	3	1 - 8	197	2	2 - 6
Musculoskeletal/Skin Conditions	91	1	0 - 10	81	1	0 - 10
Neuropsychiatric/Sensory Disease	87	1	0 - 10	78	3	0 - 20
Urologic Disease	74	3	0 - 37	57	4	0 - 46

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	490
Occupancy Rate (%):	78
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	365
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	223
Registered Nurses:	527
Licensed Practical Nurses:	94

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

PROVIDENCE HOSP

1150 VARNUM ST NE
WASHINGTON, DC 20017

Medicare Hospital Provider Number: 090006

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,152	12	11 - 15	1,991	11	11 - 15
Cancer	98	43	32 - 55	72	35	30 - 56
Cerebrovascular Accidents	87	20	17 - 36	88	26	17 - 37
Gastrointestinal Catastrophes	18	44	15 - 61	16	38	14 - 62
Infectious Disease	19	37	15 - 59	16	69	19 - 64
Metabolic/Electrolyte Disorders	65	26	16 - 44	61	25	12 - 40
Pulmonary Disease	73	23	16 - 38	77	13	17 - 35
Renal Failure	13	31	12 - 70	15	20	8 - 64
Severe Acute Heart Disease	83	35	29 - 52	82	27	30 - 51
Severe Chronic Heart Disease	118	14	17 - 32	139	12	17 - 30
Severe Trauma	4	25	4 - 80	4	0	3 - 72
Gastrointestinal Disease	107	3	2 - 10	121	7	0 - 15
Gynecologic Disease	7	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	233	4	1 - 8	162	2	2 - 8
Musculoskeletal/Skin Conditions	161	2	0 - 9	151	1	1 - 6
Neuropsychiatric/Sensory Disease	62	6	1 - 19	63	0	1 - 9
Urologic Disease	131	2	0 - 9	119	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	355
Occupancy Rate (%):	81
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	362
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	52
Registered Nurses:	332
Licensed Practical Nurses:	35

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PROVIDENCE
HOSPITAL

October 19, 1988

Dr. William L. Roper, Administrator
Health Care Financing Administration
Department of Health & Human Services
6325 Security Blvd.
Baltimore, Maryland 21207

Provider #09-0006

Dear Doctor Roper:

A review of Providence Hospital's calendar year 1987 mortality statistics favorably indicated that our hospital fell either below, or was within, the predicted mortality range for all diagnostic categories.

The Health Care Financing Administration has stated, and we agree, that these statistics can not be used to measure quality. Providence Hospital uses these statistics as a screening tool to supplement a comprehensive quality review program which monitors all aspects of patient care delivery.

Data errors continue to compromise the validity of these statistics. Of the 2,152 patients whose last admission in 1987 was to Providence Hospital, 259 patients died within 30 days of their last admission. 239 patients expired in the hospital and 20 patients died outside of the hospital. The following was noted in reviewing the data supplied by HCFA:

- Average age was 78 years;
- 2 patients listed as expired were discharged alive on the date HCFA indicated they had died;
- In 1 case, no record could be found of admission or discharge at Providence Hospital;
- In 7 cases the date of expiration was incorrect as supported by medical record documentation;
- In 2 cases, the patient's age was listed at 92 when the actual ages were 106 and 103, as supported by the medical record.

These statistics still do not adequately take into account the severity of the patients' illness. For example, in comparing 1986 to 1987 data, the pulmonary death rate, although within the predicted ranges, increased from 13% in 1986 to 23% in 1987. A review of the 17 patients who died in this disease category in 1987, revealed an average age of 82. 11 of the 17 patients had "Do Not Resuscitate" orders on their charts.

In August 1987, Providence Hospital initiated a Palliative Care Program to care for terminally-ill patients. 17 of the 259 patients who died, were receiving this special hospice-like care.

The use of statistics in health care evaluation is an evolutionary process which must incorporate many variables, including individual risk of death, availability of family support and access to health care. All of these variables are best evaluated in individual case review which is a regular part of our quality assurance program.

We will continue to incorporate these statistics into our program as a means of identifying areas requiring further review.

We appreciate the opportunity to provide information to you for inclusion in your report prior to any public release.

Sincerely,

Sister Catherine Norton

Sister Catherine Norton
President

SCN:elr
Attachment

SIBLEY MEMORIAL HOSP

5255 LOUGHBORO RD NW
WASHINGTON, DC 20016

Medicare Hospital Provider Number: 090005

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,517	9	10 - 14	2,536	8	9 - 13
Cancer	119	31	28 - 50	132	27	27 - 48
Cerebrovascular Accidents	90	24	17 - 37	93	16	20 - 37
Gastrointestinal Catastrophes	24	25	18 - 56	17	18	15 - 56
Infectious Disease	30	43	21 - 58	17	41	20 - 66
Metabolic/Electrolyte Disorders	35	17	14 - 45	32	19	10 - 43
Pulmonary Disease	97	23	20 - 40	99	24	17 - 37
Renal Failure	2	50	5 - 94	4	25	7 - 84
Severe Acute Heart Disease	80	31	31 - 53	64	27	31 - 54
Severe Chronic Heart Disease	113	19	14 - 31	112	22	15 - 32
Severe Trauma	4	0	6 - 72	1	0	0 - 98
Gastrointestinal Disease	144	6	1 - 11	156	3	1 - 8
Gynecologic Disease	40	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	190	2	2 - 7	219	2	2 - 7
Musculoskeletal/Skin Conditions	358	1	1 - 5	386	2	1 - 5
Neuropsychiatric/Sensory Disease	71	3	1 - 14	93	1	1 - 9
Urologic Disease	167	2	0 - 12	174	2	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	362
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	282
Percent of Physicians Who Are Board Certified Specialists:	88
Interns and Residents:	0
Registered Nurses:	355
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

5255 Loughboro Road, Northwest
Washington, D.C. 20016
Telephone (202) 537-4680

Chief Executive Officer

Sibley Memorial Hospital

October 21, 1988

William Roper, M.D.
Administrator
Healthcare Financing Administration
Department of Health and Human Services
6325 Security Blvd.
Baltimore, MD 21207

re: Comments on 1987 Medicare Mortality Statistics for Sibley Memorial Hospital, Medicare provider, No. 09005

Dear Dr. Roper:

The data provided by the Health Care Financing Administration (HCFA) of the Medicare participants whose last discharge to Sibley was in 1987 and who expired within 30 days of that discharge was reviewed by the staff of Sibley Memorial Hospital. Our detailed analysis identified significant errors and discrepancies in the data provided by HCFA which makes it impossible to accurately or adequately comment on this mortality data.

These discrepancies can be briefly summarized into three separate categories: 1) incorrect patient data provided by HCFA, 2) missing patient data identified by Sibley's records but not included in the HCFA patient data base and 3) incorrect hospital characteristics information as presented in the summary statistics section. The specifics of these errors are:

1. After reviewing each Medicare patient listed in the data base provided by HCFA, we identified 42 Medicare beneficiaries who were incorrectly flagged by HCFA as having not passed away within 30 days of their discharge. Upon a thorough review of the date of discharge and date of death provided by HCFA, these patients do appear , in fact, to have expired within 30 days of discharge. Attachment 1 contains those pages from the list provided by HCFA with these 42 patients underlined.

2. After an exhaustive review of our own 1987 patient information base, we identified 39 Medicare inpatients who were discharged "Expired" but these patients could

not be found when cross-checked against the HCFA mortality information provided. These additional patients are presented in Attachment 2. At this time, it is not certain why these Medicare patients were omitted in the HCFA Mortality report. We have made several attempts to contact HCFA staff members regarding this and the other inconsistencies presented but have not been able to speak to anyone.

3. Using a copy of the 1986 Sibley Hospital AHA survey questionnaire and comparing this to the information provided in your hospital characteristics section, the following mistakes were identified:

   a. Sibley Hospital operates 362 total beds, not 273;

   b. Of Sibley's 279 active staff physicians, 88 percent, rather than 80 percent, are board certified;

   c. The hospital's Registered Nurses per bed ratio is 1.15 and is based upon 362 beds and 417 Registered nurses; and

   d. The hospital does not provide organ transplant services but does offer Coronary Care Unit services.

We consider these data errors and inconsistencies significant and, until they are reconciled, do not believe that we can accurately or adequately comment on this mortality information. Because of these data flaws, HCFA's calculation of Sibley's mortality rates and predicted mortality ranges cannot be considered valid and, therefore, cannot be appropriately assessed or commented upon. We are very concerned that we were not able to contact anyone at HCFA to discuss these data problems even though we repeatedly called the telephone number provided in your letter which accompanied the data. In an effort to resolve this problem, we are requesting that HCFA review its Medicare data base, correct Sibley Memorial Hospital's Medicare mortality data, repeat the analysis and then allow us the opportunity to review it before it is released to the public. We appreciate the fact that this request may be unusual, but believe that the circumstances as outlined warrant HCFA to seriously consider our request.

Sibley Memorial Hospital has a well deserved reputation for providing high quality care. Our nurses, technologists, and other health professionals provide a high quality of personalized patient care. The quality of our medical staff is ensured by a comprehensive and rigorous credentialling and reappointment process. Sibley is a full service community hospital and offers a wide range of medical/surgical services. For a community hospital, Sibley treats a large number of cancer patients and performs a broad range of surgical procedures including a large number of ophthalmic, orthopedic and neurosurgical procedures.

Although HCFA has made important adjustments over the 1986 methodology to analyze quality of care through mortality information, this type of statistical analysis of mortality continues to be most useful primarily as a screen for triggering additional quality assurance activities. We do not believe that statements about quality of care can be based solely on mortality statistics. Sibley will continue to evaluate the mortality data and incorporate this evaluation into our ongoing quality assurance program. We have a comprehensive quality assurance program which is designed to continually monitor critical elements of all patient services. The results of these monitoring activities are reviewed on an ongoing basis and assist in determining what corrective actions will be taken to improve patient care. The comprehensive quality assurance program assists in maintaining high quality patient care at Sibley Memorial Hospital.

Thank you for the opportunity to review and comment on this data.

Sincerely,

Robert L Sloan

Robert L. Sloan
Chief Executive Officer

WALTER REED ARMY HOSP

6825 16TH ST NW
WASHINGTON , DC 20012

Medicare Hospital Provider Number: 09003F

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1	100	0 -100	0	-	-
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	0	-	-
Musculoskeletal/Skin Conditions	0	-	-	0	-	-
Neuropsychiatric/Sensory Disease	0	-	-	0	-	-
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA (not available)

Total Beds (#):	1,523
Ownership/Control:	Federal Government

STAFFING

Interns and Residents:	0
Registered Nurses:	0
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WASHINGTON HOSP CTR

110 IRVING ST NW
WASHINGTON, DC 20010

Medicare Hospital Provider Number: 090011

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,778	8	8 - 12	4,264	9	9 - 13
Cancer	148	32	30 - 51	172	34	32 - 52
Cerebrovascular Accidents	104	15	17 - 33	125	22	19 - 35
Gastrointestinal Catastrophes	24	29	20 - 59	17	41	17 - 64
Infectious Disease	32	41	19 - 56	42	36	20 - 53
Metabolic/Electrolyte Disorders	65	26	14 - 42	60	15	12 - 37
Pulmonary Disease	104	22	17 - 36	80	20	15 - 35
Renal Failure	80	9	3 - 50	72	7	5 - 52
Severe Acute Heart Disease	182	27	29 - 45	152	32	30 - 48
Severe Chronic Heart Disease	217	13	16 - 28	195	15	15 - 28
Severe Trauma	23	48	11 - 54	5	40	3 - 78
Gastrointestinal Disease	174	3	1 - 8	178	2	1 - 7
Gynecologic Disease	23	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	1,154	3	2 - 5	947	3	2 - 5
Musculoskeletal/Skin Conditions	266	3	1 - 6	237	3	1 - 7
Neuropsychiatric/Sensory Disease	296	1	1 - 6	277	1	1 - 6
Urologic Disease	212	0	0 - 5	213	0	0 - 5

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	784
Occupancy Rate (%):	90
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	804
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	205
Registered Nurses:	921
Licensed Practical Nurses:	128

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

AMI DOCTORS HOSP PRINCE GEORGE CNTY

8118 GOOD LUCK ROAD
LANHAM, MD 20801

Medicare Hospital Provider Number: 210051

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,566	12	9 - 14	1,591	11	10 - 15
Cancer	67	34	25 - 51	56	41	32 - 60
Cerebrovascular Accidents	53	28	17 - 42	83	23	18 - 38
Gastrointestinal Catastrophes	13	23	11 - 59	8	0	20 - 62
Infectious Disease	13	23	11 - 58	25	36	16 - 56
Metabolic/Electrolyte Disorders	34	15	10 - 41	41	29	15 - 47
Pulmonary Disease	88	26	13 - 35	75	15	15 - 35
Renal Failure	6	17	5 - 74	9	56	17 - 82
Severe Acute Heart Disease	42	48	26 - 57	35	43	24 - 57
Severe Chronic Heart Disease	105	23	16 - 34	90	26	15 - 34
Severe Trauma	1	0	2 - 97	3	0	14 - 87
Gastrointestinal Disease	110	5	0 - 13	128	3	1 - 10
Gynecologic Disease	22	5	0 - 47	18	0	0 -100
Low-Risk Heart Disease	193	2	1 - 7	182	3	2 - 8
Musculoskeletal/Skin Conditions	165	4	0 - 10	185	2	0 - 7
Neuropsychiatric/Sensory Disease	19	5	0 - 71	35	0	0 - 18
Urologic Disease	95	0	0 - 11	56	0	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 250
Occupancy Rate (%): 74
Ownership/Control: Private, For Profit

STAFFING

Total Number of Physicians: 525
Percent of Physicians Who Are Board Certified Specialists: 90
Interns and Residents: 0
Registered Nurses: 184
Licensed Practical Nurses: 45

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

ANNE ARUNDEL GEN HOSP

FRANKLIN CATHEDRAL STS
ANNAPOLIS, MD 21401

Medicare Hospital Provider Number: 210023

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,585	13	9 - 14	2,566	13	10 - 14
Cancer	142	50	32 - 54	141	48	32 - 54
Cerebrovascular Accidents	104	21	17 - 34	110	26	19 - 37
Gastrointestinal Catastrophes	26	46	18 - 59	25	16	19 - 53
Infectious Disease	19	37	14 - 58	14	29	12 - 60
Metabolic/Electrolyte Disorders	33	21	9 - 43	46	33	12 - 44
Pulmonary Disease	122	17	14 - 31	119	23	13 - 32
Renal Failure	17	41	8 - 65	15	20	11 - 66
Severe Acute Heart Disease	75	41	25 - 49	94	40	27 - 49
Severe Chronic Heart Disease	118	21	14 - 31	110	23	17 - 34
Severe Trauma	3	33	1 - 88	3	67	2 - 86
Gastrointestinal Disease	164	3	1 - 8	134	4	1 - 10
Gynecologic Disease	19	0	0 -100	25	0	0 -100
Low-Risk Heart Disease	256	2	1 - 6	262	4	1 - 7
Musculoskeletal/Skin Conditions	288	4	1 - 7	250	3	1 - 7
Neuropsychiatric/Sensory Disease	98	5	0 - 15	99	4	0 - 17
Urologic Disease	113	1	0 - 14	121	2	1 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	303
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	227
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	0
Registered Nurses:	403
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

BALTIMORE CNTY GENL HOSP

5401 OLD COURT RD
RANDALLSTOWN, MD 21133

Medicare Hospital Provider Number: 210040

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,044	14	12 - 16	2,788	15	11 - 15
Cancer	103	31	29 - 52	77	44	30 - 56
Cerebrovascular Accidents	158	16	21 - 35	121	31	19 - 37
Gastrointestinal Catastrophes	32	34	18 - 54	23	39	14 - 56
Infectious Disease	82	45	23 - 49	47	40	23 - 55
Metabolic/Electrolyte Disorders	71	18	12 - 38	75	29	9 - 37
Pulmonary Disease	230	30	20 - 35	171	39	19 - 37
Renal Failure	8	50	8 - 76	11	45	12 - 75
Severe Acute Heart Disease	175	37	31 - 48	182	36	32 - 49
Severe Chronic Heart Disease	160	24	17 - 32	142	23	16 - 31
Severe Trauma	5	20	3 - 75	2	0	0 - 92
Gastrointestinal Disease	171	1	1 - 6	172	2	1 - 7
Gynecologic Disease	9	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	331	2	2 - 6	293	2	2 - 6
Musculoskeletal/Skin Conditions	262	2	1 - 6	261	2	1 - 6
Neuropsychiatric/Sensory Disease	66	3	0 - 18	59	3	0 - 20
Urologic Disease	140	4	0 - 17	122	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 220
Occupancy Rate (%): 89
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 298
Percent of Physicians Who Are Board Certified Specialists: 60
Interns and Residents: 0
Registered Nurses: 234
Licensed Practical Nurses: 30

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

Baltimore
County
General
Hospital

5401 Old Court Road
Randallstown, Maryland
21133

(301) 521-2200

September 27, 1988

Health Standards and Quality Review
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Ms. Kappert:

Gentlemen:

This is to acknowledge receipt of the MEDICARE HOSPITAL MORTALITY INFORMATION reported to Baltimore County General Hospital.

I would like to make the appropriate corrections to the HOSPITAL CHARACTERISTICS section of the report as follows:

BEDS:	Change from 180 to 240
STAFFING:	
TOTAL NUMBER OF PHYSICIANS:	Change from 270 to 470
SPECIALTY SERVICES:	
ORGAN TRANSPLANT SERVICE	Changes from YES to NO

Thanking you, in advance, for your cooperation in this matter, I remain

Sincerely,

Robert L. Bartholomew, FACHE
Senior Vice President
Medical Staff Relations

RLB:pl/1139B

cc: Robert Fischer
Steven Summer

BON SECOURS HOSP

2025 W FAYETTE ST
BALTIMORE, MD 21223

Medicare Hospital Provider Number: 210013

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,742	12	11 - 15	1,608	12	11 - 16
Cancer	77	40	33 - 58	68	43	31 - 57
Cerebrovascular Accidents	58	24	17 - 40	80	16	18 - 36
Gastrointestinal Catastrophes	25	36	16 - 56	13	46	13 - 65
Infectious Disease	21	33	18 - 59	5	40	15 - 85
Metabolic/Electrolyte Disorders	19	5	8 - 40	35	26	14 - 48
Pulmonary Disease	97	25	18 - 38	88	22	16 - 36
Renal Failure	18	28	7 - 63	16	56	13 - 71
Severe Acute Heart Disease	53	38	27 - 54	43	23	27 - 54
Severe Chronic Heart Disease	108	13	15 - 30	101	18	14 - 31
Severe Trauma	1	0	0 - 99	2	0	5 - 89
Gastrointestinal Disease	107	4	2 - 11	126	4	1 - 10
Gynecologic Disease	10	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	255	2	2 - 6	186	4	2 - 8
Musculoskeletal/Skin Conditions	124	2	1 - 9	99	1	1 - 8
Neuropsychiatric/Sensory Disease	41	7	0 - 53	46	7	0 - 53
Urologic Disease	85	2	0 - 15	54	0	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	193
Occupancy Rate (%):	89
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	209
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	160
Licensed Practical Nurses:	30

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BON SECOURS HOSPITAL

RESPONSE TO HCFA'S 1987 MORTALITY STUDY #210013

Bon Secours Hospital is a community hospital located in southwest Baltimore City. Most of our patients live near the hospital and are elderly and poor. Because of their age and financial situation, many of our patients seek medical help late in the course of their multiple illnesses.

The HCFA report includes a list of Medicare patients who expired in 1987. Actually only one-half of these patients expired at Bon Secours Hospital. The average age of the patients listed in our report is 76 years old. Our mortality rate for these elderly patients was at the low end of HCFA's predicted range. Many of our elderly patients are admitted to the hospital with cancers, lung diseases and heart problems.

Our mortality rate for all hospital patients in 1987, including the Medicare patients, is about two-thirds less than the rate for Medicare patients alone.

Bon Secours Hospital has been committed to providing good help to those in need for many years. An important part of that good help is a comprehensive quality review program. We use many indicators in the program to help us identify opportunities to improve patient care, including mortality review. These indicators, though, are not measures of quality care - they are used to point the way to what possibly might be an area requiring further review.

Bon Secours Hospital is committed to high quality patient care. Any indication of a possible quality problem is promptly examined. If a problem is indeed identified, corrective action is swiftly taken. Our governing board and medical staff have provided the means to do this within our quality review program.

10/88
MWD

CALVERT MEMORIAL HOSP

ROUTES 2 3
PRINCE FREDERICK, MD 20678

Medicare Hospital Provider Number: 210039

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	844	12	9 - 15	835	12	10 - 15
Cancer	34	56	26 - 61	22	36	24 - 64
Cerebrovascular Accidents	34	18	15 - 42	56	29	19 - 44
Gastrointestinal Catastrophes	4	100	19 - 83	8	38	11 - 72
Infectious Disease	7	14	10 - 67	8	38	10 - 71
Metabolic/Electrolyte Disorders	17	29	9 - 55	15	40	7 - 57
Pulmonary Disease	46	37	16 - 46	42	24	9 - 38
Renal Failure	4	0	9 - 78	6	50	12 - 84
Severe Acute Heart Disease	35	31	21 - 53	35	43	26 - 59
Severe Chronic Heart Disease	35	23	10 - 39	34	24	15 - 44
Severe Trauma	1	0	0 - 99	2	0	1 - 90
Gastrointestinal Disease	57	0	1 - 10	86	0	1 - 7
Gynecologic Disease	9	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	96	3	1 - 11	120	3	1 - 10
Musculoskeletal/Skin Conditions	85	1	0 - 10	84	1	0 - 10
Neuropsychiatric/Sensory Disease	22	5	0 - 77	27	0	0 - 74
Urologic Disease	42	0	0 - 31	30	3	0 - 70

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	121
Occupancy Rate (%):	77
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	55
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	103
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

CMH
CALVERT MEMORIAL HOSPITAL

100 Hospital Road
Prince Frederick, MD 20678
(301) 535-4000

October 19, 1988

Mrs. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert,

The following is a review of the Medicare HCFA Mortality for 1987 data, utilizing 16 diagnostic categories and (1) "other".

These statistics show the number of Medicare patients whose last discharge in 1987 was from Calvert Memorial Hospital and the actual percentage of those patients who died within 30 days of the admission.

In addition, HCFA has defined a predicted range of the percentage of patients who would have been expected to die, given appropriate adjustments for patient mix.

Although Calvert Memorial Hospital's (CMH) mortality rates fell within the predicted mortality rate ranges, it is necessary to intrepret the meaningfulness of this data. Our internal quality assurance review reflects that of the 103 mortalities reported they can be divided into two groups.

The first group examined were those patients who expired post-discharge. Eighteen patients were reported to have expired post-discharge. Our review demonstrates that figure to be 16 patients, with errors noted on 2 cases where the discharge and/or date of death were reported incorrectly. Of those 16 patients discharged, 14 (88%) had terminal illnesses, end-stage diseases, or pre-existing conditions. The remaining 2 (12%) were transferred to a tertiary center for further treatment, where upon they expired.

The second group of patients examined were those who died at Calvert Memorial Hospital, of which 87 patients were identified. 81% of those patients who expired at Calvert Memorial Hospital had either a terminal illness or a pre-existing condition on admission. The remaining patients (19%) presented for admission with acute illnesses and were treated appropriately.

Further analysis of the mortality data reflects that, (a) (71%) of the deaths reported for Calvert Memorial Hospital were patients who had a "Do Not Resuscitate" or "No Code" order; and (b) the average age of these 103 patients was 79 years old.

In conclusion, mortality review is one of numerous quality of care monitors performed by physician committees at Calvert Memorial Hospital for many years. Some indicators utilized to monitor patient care at Calvert Memorial Hospital are acquired infections, medical and/or surgical complications, drug reactions, unplanned or more extensive surgery, readmission for the same condition within several days of previous discharge, and many others. The review focuses on the availability of services to treat the patient and the appropriateness of treatment and intervention. The indicators target reviews which can evaluate all facets of patient care, hospital policy and procedure, and ultimately determine whether the patient received adequate care to meet patient needs. In summary, Calvert Memorial Hospital recognizes its responsibility in light of federal cost-containment legislation and its influence on the outcomes of patient care.

Respectfully submitted,

James J Xinis

James J. Xinis,
President

JJX/sm

cc: File
Quality Assurance

CARROLL COUNTY GEN HOSP

MEMORIAL AVE
WESTMINSTER, MD 21157

Medicare Hospital Provider Number: 210033

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,603	16	10 - 14	1,518	13	10 - 15
Cancer	41	76	28 - 58	28	68	26 - 62
Cerebrovascular Accidents	77	29	18 - 39	77	25	17 - 38
Gastrointestinal Catastrophes	7	43	8 - 73	4	50	6 - 83
Infectious Disease	21	38	16 - 58	28	29	17 - 54
Metabolic/Electrolyte Disorders	20	20	7 - 48	21	10	5 - 40
Pulmonary Disease	80	30	15 - 38	84	30	14 - 36
Renal Failure	6	67	7 - 78	5	60	8 - 83
Severe Acute Heart Disease	97	32	28 - 49	122	26	27 - 45
Severe Chronic Heart Disease	94	37	13 - 34	79	23	15 - 35
Severe Trauma	3	33	1 - 87	4	25	8 - 82
Gastrointestinal Disease	115	7	0 - 18	98	3	1 - 12
Gynecologic Disease	18	0	0 -100	19	0	0 -100
Low-Risk Heart Disease	242	2	1 - 6	223	3	1 - 7
Musculoskeletal/Skin Conditions	100	2	1 - 10	79	0	0 - 8
Neuropsychiatric/Sensory Disease	32	9	0 - 38	27	0	0 - 33
Urologic Disease	96	0	0 - 8	69	1	0 - 37

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 118
Occupancy Rate (%): 78
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 85
Percent of Physicians Who Are Board Certified Specialists: (not available)
Interns and Residents: 0
Registered Nurses: 154
Licensed Practical Nurses: 16

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

CHILDRENS HOSP INC

3825 GREENSPRING AVE
BALTIMORE, MD 21211

Medicare Hospital Provider Number: 210031

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	288	0	2 - 6	289	0	1 - 5
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	1	0	1 - 97	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	1	0	0 -100
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	1	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	2	0	0 -100	9	0	0 -100
Musculoskeletal/Skin Conditions	184	0	0 - 4	190	0	0 - 4
Neuropsychiatric/Sensory Disease	3	0	0 -100	12	0	0 -100
Urologic Disease	1	0	0 -100	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	68
Occupancy Rate (%):	45
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	200
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	71
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CHURCH HOSP CORP

100 N BROADWAY
BALTIMORE, MD 21231

Medicare Hospital Provider Number: 210026

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,031	12	11 - 15	2,100	11	11 - 15
Cancer	118	37	33 - 55	110	37	34 - 56
Cerebrovascular Accidents	64	17	18 - 38	77	23	16 - 36
Gastrointestinal Catastrophes	12	25	12 - 62	20	40	18 - 62
Infectious Disease	48	27	26 - 55	40	35	24 - 57
Metabolic/Electrolyte Disorders	52	19	12 - 40	41	24	12 - 44
Pulmonary Disease	92	29	16 - 38	88	22	16 - 37
Renal Failure	6	83	13 - 79	8	13	20 - 80
Severe Acute Heart Disease	64	34	26 - 51	67	31	26 - 50
Severe Chronic Heart Disease	137	22	15 - 30	125	18	15 - 31
Severe Trauma	1	0	3 - 98	4	0	7 - 73
Gastrointestinal Disease	187	4	1 - 9	213	2	2 - 7
Gynecologic Disease	17	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	292	4	2 - 7	301	4	1 - 7
Musculoskeletal/Skin Conditions	153	3	1 - 8	170	2	1 - 7
Neuropsychiatric/Sensory Disease	39	0	0 - 22	64	2	0 - 14
Urologic Disease	67	1	0 - 25	69	1	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 188
Occupancy Rate (%): 89
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 208
Percent of Physicians Who Are Board Certified Specialists: 67
Interns and Residents: 0
Registered Nurses: 147
Licensed Practical Nurses: 20

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

CHURCH
HOSPITAL

October 20, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

Church Hospital has received the Health Care Financing Administration Mortality report for calendar year 1987, in which we are found to be 4 % above the predicted range in diagnosis category renal failure.

Upon preliminary review, we have found some questions with regard to:

1. Authentication of coded principal diagnoses;

2. Other secondary and serious intercurrent diagnoses which impact upon the patient's hospitalization and eventual death;

3. Non-compliance of patients with the recommended treatment obviously impacting upon the patients' outcome;

4. Deaths occurring after discharge were included and may be in no way related to the reason for hospitalization.

Thank you for the opportunity to comment.

Sincerely,

Gloria Cameron

Gloria R. Cameron
Senior Vice President

GC:sbb

cc: T. G. Whedbee, Jr.
James R. Bobb
Chiefs of Service
Quality Assurance Department

DORCHESTER GENERAL HOSP

300 BYRN ST PO BOX 439
CAMBRIDGE, MD 21613

Medicare Hospital Provider Number: 210010

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	865	14	9 - 15	830	13	9 - 15
Cancer	21	62	25 - 66	21	57	22 - 64
Cerebrovascular Accidents	40	27	13 - 41	34	35	14 - 46
Gastrointestinal Catastrophes	1	0	0 - 99	4	50	5 - 82
Infectious Disease	2	50	5 - 93	7	29	10 - 72
Metabolic/Electrolyte Disorders	22	18	8 - 46	15	20	5 - 51
Pulmonary Disease	34	26	13 - 44	50	28	14 - 41
Renal Failure	2	50	4 - 93	3	33	8 - 90
Severe Acute Heart Disease	27	33	24 - 59	29	28	23 - 56
Severe Chronic Heart Disease	72	31	11 - 34	56	23	12 - 36
Severe Trauma	4	50	3 - 82	1	0	0 - 99
Gastrointestinal Disease	78	1	1 - 10	63	2	1 - 13
Gynecologic Disease	5	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	104	7	1 - 15	96	1	2 - 8
Musculoskeletal/Skin Conditions	74	3	0 - 15	72	3	0 - 15
Neuropsychiatric/Sensory Disease	37	3	0 - 54	20	5	0 - 70
Urologic Disease	29	14	0 - 89	34	3	0 - 59

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	114
Occupancy Rate (%):	54
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	41
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	60
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Health Care Financing Administration
October 18, 1988
Page 2

The medical records of patients who died in the low risk categories (thirteen patients) were reviewed and no quality problems were identified. It was noted that ten of these patients (77%) had significant co-morbidities which did not occasion their final admission but would certainly have contributed to their death.

In comparing the data from 1987 to 1986, an increase in the percentage of deaths due to cancer was noted. This increase was undoubtedly an effect by the addition of an oncologist to our medical staff late in 1986. As a result of our expanded oncology services, patients formerly referred to other institutions are now continuing under our care.

Should you have any questions about the corrections, please contact Sue Davis, RN, MS, Director of Quality Assurance.

Sincerely,

Alan B. Malnak, Jr.

Alan B. Malnak, Jr.
Administrator

ABM/rsg

EDWARD W MCCREADY MEMORIAL HOSPITAL

201 HALL HIGHWAY
CRISFIELD, MD 21817

Medicare Hospital Provider Number: 210045

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	284	11	7 - 15	295	10	9 - 17
Cancer	8	50	12 - 73	1	100	3 - 98
Cerebrovascular Accidents	4	25	2 - 80	12	25	8 - 57
Gastrointestinal Catastrophes	4	0	6 - 71	2	0	3 - 88
Infectious Disease	3	33	8 - 89	4	0	10 - 74
Metabolic/Electrolyte Disorders	4	25	1 - 83	2	0	2 - 88
Pulmonary Disease	22	32	12 - 52	32	3	12 - 32
Renal Failure	1	100	2 - 97	2	0	11 - 96
Severe Acute Heart Disease	8	50	11 - 72	16	38	24 - 69
Severe Chronic Heart Disease	13	0	10 - 38	17	18	9 - 47
Severe Trauma	1	0	2 - 97	0	-	-
Gastrointestinal Disease	30	3	0 - 53	25	0	0 - 34
Gynecologic Disease	4	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	43	0	1 - 13	41	5	0 - 36
Musculoskeletal/Skin Conditions	14	0	0 - 88	10	10	0 - 98
Neuropsychiatric/Sensory Disease	5	0	0 -100	3	0	0 -100
Urologic Disease	11	0	0 - 99	8	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	104
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

McCready Foundation, Inc.
Crisfield, Maryland 21817
301 968-1200

October 7, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

Dear Ms. Kappert,

I am appreciative of being allowed to review the Medicare Hospital Mortality information prior to publication.

The discrepancies are noted on the two attachments.

I have no comments at this time relative to specific data.

Sincerely,

Geraldine M. Schmidlin
Administrator

GMS/erd
Enclosures (2)

EUGENE LELAND MEMORIAL HOSPITAL

4408 QUEENSBURY ROAD
RIVERDALE, MD 20737

Medicare Hospital Provider Number: 210036

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	661	14	10 - 17	735	12	9 - 15
Cancer	19	58	25 - 69	12	58	15 - 68
Cerebrovascular Accidents	33	30	15 - 47	27	22	13 - 45
Gastrointestinal Catastrophes	6	67	8 - 75	6	17	6 - 70
Infectious Disease	9	78	15 - 69	17	24	16 - 59
Metabolic/Electrolyte Disorders	10	0	4 - 44	8	13	4 - 60
Pulmonary Disease	46	26	13 - 41	37	30	15 - 46
Renal Failure	4	25	9 - 86	6	33	5 - 78
Severe Acute Heart Disease	30	50	22 - 58	34	50	26 - 59
Severe Chronic Heart Disease	38	24	11 - 40	41	29	14 - 43
Severe Trauma	1	0	1 - 97	3	33	2 - 87
Gastrointestinal Disease	33	0	2 - 15	45	0	1 - 13
Gynecologic Disease	4	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	82	0	2 - 7	77	6	1 - 17
Musculoskeletal/Skin Conditions	58	3	0 - 21	62	0	1 - 9
Neuropsychiatric/Sensory Disease	42	0	0 - 48	116	0	0 - 6
Urologic Disease	26	4	0 - 34	32	3	0 - 90

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	120
Occupancy Rate (%):	73
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	112
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	87
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LELAND

Leland Memorial Hospital / P.O. Box 667 / 4401 East-West Highway / Riverdale, Maryland 20737 / 301-699-2000

Medicare Provider #210036

COMMENTS ON THE 1987 HCFA MORTALITY DATA

Interpretive Remarks

With one exception, Leland Memorial Hospital's actual mortality rates fall below or well within the range of predicted mortality rates in all of the diagnostic categories. In fact, mortality rates fall below the midpoint of predicted mortality rates in the majority of diagnostic categories.

Results of Preliminary Medicare Record Review

A preliminary review has been conducted for each diagnostic category with a mortality rate above the midpoint of the predicted mortality rate.

*Cancer: 19 cases, 11 deaths. Nine of the eleven patients who died were classified as "NO CODE." ("No code" means that, by order of a physician and by agreement of the family and/or patient, hospital staff should not attempt to resuscitate the patient in the event of cardiopulmonary arrest.) Of the remaining two patients who died, one was a 79-year-old with inoperable lymphoma and the other was an 85-year-old metastatic gastric cancer.

*Gastrointestinal Catastrophes: 6 cases, 4 deaths. Two of the 4 patients who died were classified as "NO CODE." Another had 7 comorbidity problems, including acute renal failure and hypovolemic shock.

*Infectious Disease: 9 cases, 7 deaths. Six of the 7 patients who died were "NO CODE." The 7th patient was 85 years old and had 6 comorbidities including acute and chronic renal failure, arrythmia, pneumonia, and anemia.

*Severe Acute Heart Disease: 30 cases, 15 deaths. Four of the 15 patients who died were classified as "NO CODE." Fourteen of the 15 patients had 4 or more comorbidities.

All deaths occurring at Leland Memorial Hospital are reviewed monthly as part of a regular Quality Assurance program. The hospital also participates in the Maryland Hospital Association's Quality Indicator Project, which studies unadjusted mortality data and assists the hospital in analyzing in-hospital deaths.

* * *

Charley Eldridge

Charley Eldridge, President

FALLSTON GENERAL HOSP

200 MILTON AVE
FALLSTON, MD 21047

Medicare Hospital Provider Number: 210049

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,391	11	10 - 15	1,462	10	10 - 14
Cancer	36	53	30 - 64	37	43	28 - 62
Cerebrovascular Accidents	48	21	15 - 40	54	22	18 - 42
Gastrointestinal Catastrophes	10	60	13 - 70	9	44	13 - 72
Infectious Disease	16	31	15 - 61	16	25	16 - 60
Metabolic/Electrolyte Disorders	25	20	9 - 46	19	37	12 - 56
Pulmonary Disease	42	33	18 - 48	54	22	16 - 41
Renal Failure	3	33	10 - 92	5	40	12 - 86
Severe Acute Heart Disease	88	31	27 - 48	80	26	30 - 51
Severe Chronic Heart Disease	79	19	18 - 37	75	19	16 - 35
Severe Trauma	5	0	11 - 68	4	0	10 - 75
Gastrointestinal Disease	95	1	2 - 9	108	1	1 - 7
Gynecologic Disease	10	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	216	4	2 - 8	269	4	2 - 8
Musculoskeletal/Skin Conditions	113	3	0 - 10	141	0	1 - 5
Neuropsychiatric/Sensory Disease	125	3	1 - 11	75	3	0 - 16
Urologic Disease	49	4	0 - 42	56	0	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	150
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	146
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	140
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FRANCIS SCOTT KEY MED CTR

4940 EASTERN AVE
BALTIMORE, MD 21224

Medicare Hospital Provider Number: 210029

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,919	16	11 - 16	1,845	17	12 - 17
Cancer	60	47	31 - 59	64	42	29 - 56
Cerebrovascular Accidents	84	23	16 - 36	80	27	16 - 37
Gastrointestinal Catastrophes	16	38	14 - 62	23	30	17 - 58
Infectious Disease	29	55	20 - 58	36	61	22 - 57
Metabolic/Electrolyte Disorders	35	26	9 - 43	23	39	14 - 55
Pulmonary Disease	102	37	16 - 38	99	32	18 - 39
Renal Failure	36	11	2 - 55	26	12	2 - 57
Severe Acute Heart Disease	104	46	28 - 50	104	46	29 - 50
Severe Chronic Heart Disease	96	11	17 - 32	122	19	14 - 30
Severe Trauma	27	56	16 - 57	19	47	10 - 57
Gastrointestinal Disease	79	3	1 - 13	66	3	1 - 14
Gynecologic Disease	7	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	182	4	2 - 9	209	8	1 - 10
Musculoskeletal/Skin Conditions	149	7	0 - 14	136	4	0 - 10
Neuropsychiatric/Sensory Disease	145	0	0 - 6	119	1	1 - 7
Urologic Disease	58	2	0 - 17	54	0	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	561
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	251
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	47
Registered Nurses:	352
Licensed Practical Nurses:	104

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

The
Francis Scott Key
Medical Center

4940 Eastern Avenue / Baltimore, MD 21224
(301) 550-0100

October 19, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Attention: Ms. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Acute Hospital
Medicare Provider
No. 210029

Dear Ms. Kappert:

The Francis Scott Key Medical Center is in receipt of 1987 mortality data. We have reviewed the data and find:

1. HCFA reports 299 total deaths. We are able to verify only 297 of the 299 deaths reported. Internal review demonstrates that 1 of 299 patients reported, ([redacted]) has never been a patient at The Francis Scott Key Medical Center and another patient ([redacted]) did not expire on August 14, 1987 as reported. That patient was treated at The Francis Scott Key Medical Center on August 30, 1987. Also, in 13 of the 297 confirmed deaths, discrepancies in patient discharge date or date of death are present. See Attachment A.

2. Of the 297 confirmed deaths, 32 (11%) died after hospital discharge. Examination of these patients' medical records reveals that 16 of these 32 patients (50%) were discharged to a nursing home (12 of 16 to our own Mason F. Lord Chronic Hospital and Nursing Facility, located on The Francis Scott Key Medical Center campus).

3. Mortality data for all causes and by diagnostic category demonstrates that The Francis Scott Key Medical Center's medicare mortality experience falls within predicted HCFA mortality ranges.

4. Data reported as hospital characteristics are substantially incorrect. Correct information follows:

JOHNS
HOPKINS
HEALTH
SYSTEM

Acute Beds set up and staffed: 360
Occupancy Rate (%): 67%
Ownership/Control: Private, Non-Profit Staffing
  Total number of physicians: 250
  Percent of physicians who are Board Certified
    Specialists: 69%
  Interns and Residents per acute bed: 0.19
  Registered Nurses per bed: 1.03
  Licensed Practical Nurses per bed: 0.28

Specialty Services:
  Shock/Trauma or Burn Unit: Yes
  Coronary Care Unit: Yes
  Organ Transplant Service: Yes
  Hospice Care: No

We are appreciative of the opportunity to review HCFA mortality data prior to publication and believe development of the Medicare Mortality Predictor System (MMPS) is a positive step in increasing utility of mortality data in quality assessment. Expansion of MMPS will be critical to the product's usefulness.

If you would like additional information, don't hesitate to contact me.

Sincerely,

Judy A. Reitz

Judy A. Reitz, R.N., Sc.D.
Vice President - Nursing & Clinical Affairs

JAR/dak

Attachment

FRANKLIN SQUARE HOSP

9000 FRANKLIN SQUARE DR
BALTIMORE, MD 21237

Medicare Hospital Provider Number: 210015

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,732	14	11 - 15	3,480	13	11 - 15
Cancer	143	45	34 - 55	149	45	35 - 57
Cerebrovascular Accidents	172	27	18 - 34	127	20	19 - 35
Gastrointestinal Catastrophes	31	45	17 - 55	23	52	16 - 58
Infectious Disease	49	45	22 - 53	38	42	22 - 56
Metabolic/Electrolyte Disorders	66	27	12 - 40	94	19	14 - 38
Pulmonary Disease	186	28	18 - 35	164	32	18 - 36
Renal Failure	18	44	17 - 72	19	63	18 - 73
Severe Acute Heart Disease	189	32	29 - 46	152	36	29 - 47
Severe Chronic Heart Disease	183	20	17 - 30	178	22	16 - 31
Severe Trauma	1	0	0 - 98	4	25	5 - 80
Gastrointestinal Disease	263	3	1 - 7	267	4	1 - 7
Gynecologic Disease	28	0	0 -100	29	0	0 -100
Low-Risk Heart Disease	468	5	2 - 6	432	3	2 - 6
Musculoskeletal/Skin Conditions	276	4	1 - 8	278	3	1 - 7
Neuropsychiatric/Sensory Disease	97	5	1 - 14	113	3	0 - 12
Urologic Disease	149	1	0 - 8	135	1	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	421
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	393
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	79
Registered Nurses:	479
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

FREDERICK MEMORIAL HOSP

WEST SEVENTH ST
FREDERICK, MD 21701

Medicare Hospital Provider Number: 210005

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,225	13	10 - 15	2,047	14	12 - 16
Cancer	101	51	34 - 58	119	48	32 - 55
Cerebrovascular Accidents	111	28	17 - 36	132	25	19 - 36
Gastrointestinal Catastrophes	21	43	15 - 58	16	44	12 - 61
Infectious Disease	19	21	14 - 54	16	38	17 - 64
Metabolic/Electrolyte Disorders	15	13	7 - 49	15	47	7 - 58
Pulmonary Disease	120	26	17 - 36	129	27	15 - 34
Renal Failure	10	20	8 - 68	8	25	11 - 76
Severe Acute Heart Disease	73	44	28 - 52	93	48	29 - 52
Severe Chronic Heart Disease	155	25	16 - 31	117	19	17 - 33
Severe Trauma	3	33	5 - 87	6	33	7 - 75
Gastrointestinal Disease	169	4	1 - 9	148	3	1 - 9
Gynecologic Disease	28	0	0 -100	22	0	0 -100
Low-Risk Heart Disease	291	2	2 - 6	224	2	1 - 6
Musculoskeletal/Skin Conditions	168	1	1 - 6	172	3	1 - 9
Neuropsychiatric/Sensory Disease	66	11	0 - 43	57	2	0 - 16
Urologic Disease	138	1	1 - 7	98	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	159
Occupancy Rate (%):	93
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	138
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	235
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FREDERICK MEMORIAL HOSPITAL

West Seventh Street Frederick, Maryland 21701 301-698-3300 *Celebrating Life Since 1902*

Vice President for Medical Affairs

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Hospital #210005
Medicare Provider No.
21-0005

Dear Mrs. Kappert:

In reviewing the 1987 Mortality information provided by HCFA, we are first concerned about errors in our hospital characteristics section. We are licensed for 233 beds, not 122 as shown. We also provide intensive care, including coronary care, in our SCU and PCU Units. We have an active Hospice Unit as well. The ratio of registered nurses per bed is closer to 1.1 than 1.89, but this can change some from time to time. Licensed practical nurses per bed ratio is .045 instead of 0.14.

Now, to review the mortality statistics. The hospital overall mortality rate of 13% is very acceptable and almost exactly the same as last year. We are also within the range of predicted mortality in all sixteen categories. We seemed to improve in the metabolic/ electrolyte disturbance category (47% in 1986 to 39% in 1987). However, when one looks at numbers of patients involved, (7 in 1986 and 2 in 1987) it is clear that the numbers are too small to be meaningful. The same analysis holds true for the Neuropsychiatric and Sensory Disease category where patient numbers are 1 death in 1986 and 5 deaths in 1987. One must also remember that this category was changed this year, which to some extent may account for the differences. It is best not to place a great deal of importance on percentage changes when very small numbers are involved.

We feel that mortality data is, at best, only one indicator of the quality of care provided in a hospital. While the significance of this data should not be overemphasized, we feel that it is reassuring that Frederick Memorial Hospital compares favorably to other hospitals around the country.

Very truly yours,

Charles E. Wright, M. D.
Vice President for Medical Affairs

ccs:

J. K. Kluttz, President
D. Donnelly, QA Director

FROSTBURG COMM HOSP

48 TARN TERR
FROSTBURG, MD 21532

Medicare Hospital Provider Number: 210046

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	371	11	11 - 18	374	12	11 - 18
Cancer	2	50	7 - 99	3	67	10 - 90
Cerebrovascular Accidents	14	29	12 - 58	14	36	8 - 57
Gastrointestinal Catastrophes	3	0	6 - 80	2	100	12 - 97
Infectious Disease	6	33	14 - 79	5	80	13 - 80
Metabolic/Electrolyte Disorders	10	30	2 - 64	8	13	3 - 61
Pulmonary Disease	42	19	15 - 41	32	22	15 - 46
Renal Failure	2	0	4 - 89	1	0	1 - 97
Severe Acute Heart Disease	19	32	20 - 62	19	37	19 - 61
Severe Chronic Heart Disease	29	28	11 - 45	28	25	14 - 47
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	27	4	1 - 30	26	0	1 - 20
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	59	0	1 - 9	70	1	1 - 10
Musculoskeletal/Skin Conditions	25	0	0 - 44	16	6	0 - 98
Neuropsychiatric/Sensory Disease	8	0	0 - 99	7	0	0 -100
Urologic Disease	1	0	0 -100	3	0	1 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	50
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

GARRETT COUNTY MEMORIAL HOSP

251 N FOURTH ST
OAKLAND, MD 21550

Medicare Hospital Provider Number: 210017

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	761	12	9 - 15	797	14	11 - 17
Cancer	12	33	26 - 76	9	89	27 - 75
Cerebrovascular Accidents	8	38	6 - 68	11	27	11 - 62
Gastrointestinal Catastrophes	6	33	9 - 76	7	29	10 - 72
Infectious Disease	8	38	15 - 76	8	75	16 - 73
Metabolic/Electrolyte Disorders	17	29	12 - 57	21	14	8 - 45
Pulmonary Disease	37	24	13 - 43	75	40	18 - 43
Renal Failure	1	100	3 - 99	5	60	16 - 91
Severe Acute Heart Disease	28	36	26 - 62	33	27	27 - 58
Severe Chronic Heart Disease	50	28	15 - 41	54	33	15 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	62	8	1 - 23	77	3	1 - 12
Gynecologic Disease	7	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	94	1	1 - 8	92	5	1 - 14
Musculoskeletal/Skin Conditions	54	4	0 - 23	55	0	1 - 10
Neuropsychiatric/Sensory Disease	26	0	0 - 58	31	3	0 - 34
Urologic Disease	32	3	0 - 38	22	0	0 - 93

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	76
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	29
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	39
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GARRETT COUNTY MEMORIAL HOSPITAL

MC Provider # 210017

October 19, 1988

Health Standards & Quality Bureau
HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Garrett County Memorial Hospital is pleased to have the opportunity to comment on Mortality Data Release Information.

GCMH is a 76 bed rural hospital possessing unique characteristics. There is an ongoing, organized, systematic hospital-wide QA program designed to monitor the quality and appropriateness of patient care. The following methods of assessing hospital performance are:

1. Important problems identified must be resolved.
2. Follow-up monitoring to ensure that no new problems have been introduced, and
3. The recommended corrective steps have been effective. The overall purpose of the program is to ensure the provision of consistent quality patient care and to identify opportunities to improve patient care.

Medicare Hospital Mortality Information Survey revealed a total number of 761 cases studied (23% of our total discharge patient population - 3,252). Statistics indicated that the small percentage of Medicare patients admitted to GCMH died within thirty (30) days of last admission were patients admitted with irreversible terminal illnesses. Survey statistics revealed that 87% of patient population died after discharge from the hospital. There is no current data available to identify the cause of deaths that occurred after discharge. We cannot presume that these deaths were totally related or attributed to previous hospitalizations as this survey does not permit the vehicle for measuring or monitoring this criterion. Individual patient mortality characteristics revealed average age - male population 78; average age - female population 81.

In one diagnostic category, GCMH's actual mortality rate fell outside of the range of predicted mortality rate. After correcting the error in diagnostic coding of mortality, the number category in which the actual mortality rate was outside the range of predicted mortality, the rate fell to 0%. No positive correlation was found between inappropriate care and the occurrences' percentages of deaths. Quality of care was measured by the degree of conformity to a performance standard. Appropriate care achieved optimal levels of health care delivery. It is prudent to mention that mortality reviews are a normal part of our ongoing QA/RM Program.

GCMH believes the public is certainly entitled to valid and reliable information regarding the quality of care rendered by health care providers. There is a legitimate concern that pertains to preventable deaths. While the study may imply that higher rates of overall hospital mortality are indicative of higher rates of preventable mortality, there is no support for this implication.

HCFA's Mortality Survey study does not "search" for an objective way to measure, monitor, or assure quality care in the hospital. Patient outcomes such as mortality or infection rates, are not good yardsticks to measure hospital's quality of care when meaningless comparisons of performance cannot illustrate a true event during a patient's stay or their socio-economic environment prior to their admission to the hospital as well as their environment during their recovery period after discharge from the hospital.

To summarize, we believe the individual consumer may read revealing details from this overall generic review of hospitals' mortality rates; however, it is prudent to state that this methodology is not a valid means for analyzing the delivery of health care. It behooves HCFA to present the total overall picture of optimal patient care. This survey only permits a fragmented look into the delivery of quality health care.

Very truly yours,

Bette Aronhalt

Bette Aronhalt, MDA, ART
Director, QA/RM

Enc.

11

GOOD SAMARITAN HOSP

5601 LOCH RAVEN BLVD
BALTIMORE, MD 21239

Medicare Hospital Provider Number: 210056

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,809	10	9 - 13	1,788	9	8 - 13
Cancer	85	47	30 - 55	75	44	29 - 55
Cerebrovascular Accidents	50	30	13 - 40	37	27	16 - 46
Gastrointestinal Catastrophes	17	18	13 - 54	10	0	20 - 57
Infectious Disease	5	40	5 - 78	15	27	16 - 62
Metabolic/Electrolyte Disorders	30	17	8 - 41	26	12	5 - 38
Pulmonary Disease	80	19	15 - 36	63	22	16 - 39
Renal Failure	9	22	9 - 71	14	21	9 - 66
Severe Acute Heart Disease	55	55	27 - 55	64	34	29 - 53
Severe Chronic Heart Disease	75	27	15 - 36	75	19	15 - 35
Severe Trauma	3	67	1 - 89	0	-	-
Gastrointestinal Disease	128	3	1 - 10	124	6	0 - 13
Gynecologic Disease	5	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	147	3	1 - 8	167	3	1 - 8
Musculoskeletal/Skin Conditions	388	1	1 - 4	364	1	0 - 4
Neuropsychiatric/Sensory Disease	42	5	0 - 36	41	5	0 - 72
Urologic Disease	48	0	0 - 18	71	1	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 259
Occupancy Rate (%): 71
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 258
Percent of Physicians Who Are Board Certified Specialists: 79
Interns and Residents: 29
Registered Nurses: 181
Licensed Practical Nurses: 66

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

GREATER BALTIMORE MEDICAL CENTER

6701 N CHARLES ST
BALTIMORE, MD 21204

Medicare Hospital Provider Number: 210044

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,869	9	10 - 14	2,932	9	10 - 14
Cancer	150	36	33 - 54	154	36	30 - 51
Cerebrovascular Accidents	102	25	19 - 37	97	19	21 - 39
Gastrointestinal Catastrophes	13	46	10 - 63	24	17	21 - 56
Infectious Disease	14	21	20 - 64	17	47	18 - 65
Metabolic/Electrolyte Disorders	43	14	12 - 40	38	34	11 - 46
Pulmonary Disease	106	22	18 - 37	117	24	18 - 36
Renal Failure	13	15	15 - 69	10	40	14 - 77
Severe Acute Heart Disease	79	29	30 - 52	82	40	30 - 52
Severe Chronic Heart Disease	113	20	16 - 32	101	22	15 - 33
Severe Trauma	7	14	7 - 66	5	20	9 - 77
Gastrointestinal Disease	198	2	2 - 7	214	2	1 - 6
Gynecologic Disease	62	0	0 - 90	62	0	0 -100
Low-Risk Heart Disease	322	2	1 - 6	278	3	2 - 6
Musculoskeletal/Skin Conditions	192	5	1 - 9	202	1	1 - 6
Neuropsychiatric/Sensory Disease	236	1	1 - 6	337	1	1 - 5
Urologic Disease	110	1	1 - 8	81	2	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	374
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	796
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	66
Registered Nurses:	548
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

GBMC
GREATER BALTIMORE MEDICAL CENTER

Robert P. Kowal
President

(301) 828-2121

October 20, 1988

Health Standards and Quality Bureau
HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Re: 1987 Mortality Data

Dear Administrator:

Despite the Greater Baltimore Medical Center's favorable showing in HCFA's compilation of 1987 mortality data, I feel compelled to comment, as I did in similar circumstances last year, on the considerable limitations of this analysis.

The study of mortality data, particularly when conducted in depth and on a case-by-case basis as part of a hospital's ongoing Quality Assurance efforts, can be a useful effort. But as HCFA itself has acknowledged, its ability to analyze this data is as yet rather unsophisticated. For example, and perhaps most importantly, HCFA possesses no means of adjusting its predictions for severity of illness, a factor which varies markedly from hospital to hospital according to the natures of the populations they serve, among other causes.

Furthermore, the reliability of this statistical exercise is weakened when little data exists for a particular hospital in a given category. An example of this is apparent in GBMC's own data. In only one of the sixteen specific catagories, "gastrointestinal catastrophies", did GBMC post what might appear as an arguably significant increase in mortality over 1986, although still well within HCFA's predicted range. Yet when one looks closer, it is apparent that the number of cases in this category shrank from 24 to 13. An analysis based upon such a small number of cases is inherently of little statistical reliability, and indicative more of chance than significant trends.

6701 North Charles Street
Baltimore, Maryland 21204

These and other weaknesses of this study demonstrate the limited usefulness of this data to hospitals and the public. It seems likely that its greatest value may be as one means of lending focus to hospitals' individual Quality Assurance efforts and identifying areas for further study. Hospitals cannot simply rest on the laurels of a favorable mortality report, or try to explain away an unflattering one. They must, as do GBMC and other hospitals providing quality medical care, constantly monitor the incidence of complications and the appropriateness and effectiveness of the care they give. Good patient care should be our concern every day, not just once a year.

I would also like to correct two inaccuracies in the report's Hospital Characteristics section. During calendar 1987 GBMC had 352 licensed beds, not 311 as stated. Also, its occupancy rate was approximately 76% not the 63% set forth.

Very truly yours,

Robert P. Kowal
President

GREATER LAUREL-BELTSVILLE HOSP

7100 CONTEE RD
LAUREL, MD 20810

Medicare Hospital Provider Number: 210055

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	875	11	9 - 14	859	12	9 - 15
Cancer	19	42	22 - 66	20	35	20 - 62
Cerebrovascular Accidents	39	33	14 - 44	43	40	16 - 46
Gastrointestinal Catastrophes	8	50	12 - 73	3	67	11 - 91
Infectious Disease	2	100	4 - 88	7	29	7 - 70
Metabolic/Electrolyte Disorders	23	13	9 - 43	18	22	10 - 52
Pulmonary Disease	45	20	14 - 40	40	35	16 - 47
Renal Failure	5	40	10 - 84	2	0	5 - 90
Severe Acute Heart Disease	28	50	23 - 59	41	29	24 - 53
Severe Chronic Heart Disease	47	21	14 - 39	37	14	11 - 35
Severe Trauma	2	0	3 - 88	2	100	8 - 92
Gastrointestinal Disease	59	3	0 - 20	59	10	0 - 27
Gynecologic Disease	7	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	110	4	1 - 11	116	3	1 - 10
Musculoskeletal/Skin Conditions	95	1	1 - 9	59	3	0 - 21
Neuropsychiatric/Sensory Disease	72	3	0 - 17	69	0	1 - 9
Urologic Disease	29	0	0 - 82	32	0	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	180
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	259
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	135
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

GREATER LAUREL BELTSVILLE HOSPITAL
7100 Contee Road Laurel, Maryland 20707

October 3, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

Thank you for the opportunity to review in advance the 1987 Mortality Information for Greater Laurel Beltsville Hospital. We have reviewed a sample of each diagnostic category and verified the principle diagnosis.

One error was detected on page 10, Musculoskeletal and Cutaneous Conditions Diagnostic Category. Medical Record [redacted] - the date of discharge for this patient should be August 5, 1987, instead of August 6, 1987.

Finally, the following changes are necessary in the Hospital Characteristics Section:

Beds (number): 180

Occupancy: 72.5%

Staffing:

Total number of physicians: 400

Percent of physicians who are Board Certified Specialists: 65%

Registered Nurses per bed: 2.03

Other than the above, there are no other changes to the Hospital Characteristics. If there are any questions, please do not hesitate to contact me at (301) 497-7974.

Cordially,

Richard C. Papperman, Jr.
Associate Administrator

HARFORD MEMORIAL HOSPITAL

501 S UNION AVENUE
HAVRE DE GRACE, MD 21078

Medicare Hospital Provider Number: 210006

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,360	12	8 - 13	1,350	12	8 - 13
Cancer	28	29	24 - 59	28	39	24 - 61
Cerebrovascular Accidents	40	27	13 - 42	45	33	13 - 42
Gastrointestinal Catastrophes	3	33	9 - 89	10	40	11 - 68
Infectious Disease	4	0	7 - 72	7	29	10 - 72
Metabolic/Electrolyte Disorders	59	24	11 - 39	68	25	11 - 38
Pulmonary Disease	66	29	12 - 36	53	25	13 - 39
Renal Failure	8	38	11 - 77	7	29	9 - 77
Severe Acute Heart Disease	55	36	22 - 49	52	37	22 - 50
Severe Chronic Heart Disease	83	29	13 - 34	78	21	15 - 34
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	94	10	0 - 33	82	6	0 - 18
Gynecologic Disease	8	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	269	3	1 - 6	267	2	1 - 6
Musculoskeletal/Skin Conditions	98	1	1 - 8	105	5	0 - 17
Neuropsychiatric/Sensory Disease	26	0	0 - 40	21	0	0 - 75
Urologic Disease	48	0	0 - 55	43	5	0 - 60

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 205
Occupancy Rate (%): 51
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 82
Percent of Physicians Who Are Board Certified Specialists: 63
Interns and Residents: 0
Registered Nurses: 93
Licensed Practical Nurses: 46

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

HOLY CROSS HOSPITAL

1500 FOREST GLEN ROAD
SILVER SPRING, MD 20910

Medicare Hospital Provider Number: 210004

Diagnostic Category	**Calender Year 1987**			**Calender Year 1986**		
	Cases	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**	**Cases**	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**
All Cases	3,327	13	10 - 14	3,244	13	10 - 14
Cancer	125	36	28 - 50	116	27	29 - 51
Cerebrovascular Accidents	104	26	18 - 37	120	23	19 - 36
Gastrointestinal Catastrophes	23	52	18 - 61	22	36	15 - 57
Infectious Disease	46	39	20 - 52	37	32	22 - 56
Metabolic/Electrolyte Disorders	68	29	15 - 43	74	31	11 - 38
Pulmonary Disease	177	34	18 - 35	196	29	18 - 35
Renal Failure	30	37	16 - 66	17	35	9 - 66
Severe Acute Heart Disease	122	38	31 - 51	136	40	30 - 49
Severe Chronic Heart Disease	149	23	16 - 31	157	18	16 - 30
Severe Trauma	5	0	7 - 66	4	0	6 - 72
Gastrointestinal Disease	280	4	1 - 7	246	4	1 - 7
Gynecologic Disease	56	2	0 - 39	44	0	0 -100
Low-Risk Heart Disease	302	4	1 - 7	261	4	2 - 7
Musculoskeletal/Skin Conditions	298	1	1 - 5	289	2	1 - 6
Neuropsychiatric/Sensory Disease	120	2	1 - 9	110	2	1 - 9
Urologic Disease	221	1	0 - 8	199	2	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	452
Occupancy Rate (%):	78
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	432
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	0
Registered Nurses:	595
Licensed Practical Nurses:	36

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HOWARD CNTY GNRL HOSP INC

LITTLE PATUXENT PKWY CEDAR LA
COLUMBIA, MD 21044

Medicare Hospital Provider Number: 210048

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,302	12	10 - 15	1,269	12	10 - 15
Cancer	34	38	29 - 63	25	28	24 - 61
Cerebrovascular Accidents	57	30	15 - 40	54	13	17 - 37
Gastrointestinal Catastrophes	13	31	11 - 61	8	38	10 - 71
Infectious Disease	24	50	18 - 59	24	46	20 - 61
Metabolic/Electrolyte Disorders	28	14	10 - 42	23	17	6 - 43
Pulmonary Disease	85	28	18 - 39	89	33	18 - 40
Renal Failure	9	22	17 - 78	9	33	12 - 76
Severe Acute Heart Disease	48	31	29 - 56	65	34	29 - 53
Severe Chronic Heart Disease	58	28	14 - 38	65	20	15 - 36
Severe Trauma	4	25	4 - 80	0	-	-
Gastrointestinal Disease	81	2	1 - 12	86	0	2 - 7
Gynecologic Disease	4	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	134	6	1 - 12	157	4	1 - 9
Musculoskeletal/Skin Conditions	101	2	0 - 12	97	3	0 - 13
Neuropsychiatric/Sensory Disease	104	1	0 - 11	85	1	0 - 13
Urologic Disease	45	2	0 - 29	43	7	0 - 87

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 173
Occupancy Rate (%): 90
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 212
Percent of Physicians Who Are Board Certified Specialists: 80
Interns and Residents: 0
Registered Nurses: 152
Licensed Practical Nurses: 8

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: No
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

JAMES LAWRENCE KERNAN HOSP INC

2200 N FOREST PARK AVE
BALTIMORE, MD 21207

Medicare Hospital Provider Number: 210058

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	172	0	1 - 5	194	2	1 - 7
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	1	0	0 -100
Musculoskeletal/Skin Conditions	141	0	1 - 5	152	1	1 - 7
Neuropsychiatric/Sensory Disease	3	0	0 -100	4	0	0 -100
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	39
Occupancy Rate (%):	49
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	69
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

JOHNS HOPKINS HOSP

600 N WOLFE ST
BALTIMORE, MD 21205

Medicare Hospital Provider Number: 210009

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,278	8	7 - 11	4,427	8	7 - 11
Cancer	218	17	30 - 47	212	21	31 - 49
Cerebrovascular Accidents	98	27	16 - 35	99	15	18 - 35
Gastrointestinal Catastrophes	37	24	16 - 48	29	31	12 - 50
Infectious Disease	27	41	16 - 55	35	51	20 - 56
Metabolic/Electrolyte Disorders	37	19	7 - 39	33	12	9 - 39
Pulmonary Disease	107	21	14 - 33	105	22	15 - 35
Renal Failure	48	8	7 - 52	38	13	4 - 55
Severe Acute Heart Disease	75	37	28 - 51	100	45	28 - 50
Severe Chronic Heart Disease	146	16	15 - 29	138	20	16 - 32
Severe Trauma	9	33	7 - 67	11	27	8 - 63
Gastrointestinal Disease	171	2	1 - 8	168	2	1 - 8
Gynecologic Disease	38	0	0 - 83	20	0	0 - 70
Low-Risk Heart Disease	558	5	2 - 6	609	5	2 - 6
Musculoskeletal/Skin Conditions	360	3	1 - 6	375	1	1 - 5
Neuropsychiatric/Sensory Disease	609	1	1 - 5	723	1	1 - 4
Urologic Disease	126	1	0 - 13	116	0	0 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	981
Occupancy Rate (%):	81
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	1,292
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	1,559
Licensed Practical Nurses:	42

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

The
Johns Hopkins
Hospital

600 North Wolfe Street / Administration 125
Baltimore, MD 21205
(301) 955-2491

Hamilton Moses, III, M.D.
Vice President, Medical Affairs

October 10, 1988

Health Care Financing Administration
Health Standards Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Re: The Johns Hopkins Hospital
ID No. 210009

Attention: Ms. Sandra Kappert

Dear Sirs:

The Johns Hopkins Hospital is in receipt of the 1987 Medicare mortality data. Attached please find the results of the data review performed to validate the data accuracy as well as to delineate corrections in the hospital characteristics.

We appreciate the opportunity to review the Medicare mortality data prior to general publication. If you should require additional information, please feel free to contact me.

Sincerely yours,

HMoses

Hamilton Moses, III, M.D.

HMIII:mvh

CC: Mr. Steven J. Summer

JOHNS
HOPKINS
HEALTH
SYSTEM

Response to Health Care Finance Administration (HCFA) Medicare Mortality Data

The Johns Hopkins Hospital supports the monitoring of mortality rates as one method of identifying clinical indicators but does not feel that that is an absolute proxy for quality of care. We have been routinely monitoring mortality rates for all our inpatients for several years and combine this clinical information with other clinical indicators that do assist us in measuring quality of care. As a result of having this type of clinical information available to us in an automated way, we were able to compare our data with HCFA's list of Medicare patients who died within 30 days of their admission during calendar year 1987. Our records indicate that there were over 7,800 separate Medicare admissions during the period; the HCFA release lists 4,278 Medicare patients admitted during the same period of time. It is not certain how much of this substantial difference can be explained by multiple admissions for the same patients versus HCFA's methodology. Since Hopkins normally calculated its mortality rates using total number of discharges as the denominator (whereas HCFA uses patients), the ability to compare the data is somewhat difficult. This also results in HCFA's statistics demonstrating higher mortality rates than those which are routinely produced in reporting such data.

There are a number of specific discrepancies that warrant notation:

- The demographic information listed in the lower left-hand corner of the HCFA mortality summary table is incorrect. The correct statistics are as follows:

Survey and Year: AHA 1987

Beds (#):	948
Occupancy Rate (%):	86
Ownership/Control:	Private, Non-Profit

Staffing:

Total Number of Physicians:	1,292
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents Per Bed:	0.48
Licensed Practical Nurses Per Bed:	0.07

Specialty Services:

Shock/Trauma or Burn Unit:	No
Coronary Care Unit:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

- The summary table is incomplete as it does not show "all other diseases" as a diagnostic category. In reviewing the detailed reports provided by HCFA, there were 1,614 patients, of which was further calculated to have a 7.8% mortality rate.

Preliminary analysis of the available HCFA data demonstrates that HCFA's mortality statistics for Johns Hopkins Hospital generally fall within the predicted range.

An additional point of interest is the fact that, being a tertiary care facility, we receive fairly large volumes of patients who were transferred to us from other hospitals. When reviewing the patients listed on the HCFA mortality data and matching it with Hopkins' clinical database, we have identified that of the patients who died within 30 days of their admission, 12.3% of these patients had been transferred to us from another hospital. It is statistically significant that 46% of the low risk heart disease patients who appeared in the mortality data were transfers from other acute care hospitals.

Johns Hopkins Hospital will do further analysis on several of the categories where the computed mortality rate is near the upper end range of the predicted mortality. In addition to these focused reviews, we will circulate the HCFA release to all clinical departments in order to incorporate this information into our ongoing concurrent review of quality assurance and risk management analysis.

LS/db
6 Oct. '88

KENT & QUEEN ANNES HOSP

BROWN ST
CHESTERTOWN, MD 21620

Medicare Hospital Provider Number: 210030

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	728	11	9 - 14	750	12	9 - 15
Cancer	13	69	26 - 75	25	56	31 - 70
Cerebrovascular Accidents	15	20	11 - 53	30	33	14 - 48
Gastrointestinal Catastrophes	1	100	1 - 97	2	50	5 - 93
Infectious Disease	3	33	5 - 86	13	38	19 - 69
Metabolic/Electrolyte Disorders	13	15	7 - 53	4	25	2 - 80
Pulmonary Disease	39	28	13 - 43	45	11	16 - 38
Renal Failure	7	29	15 - 81	3	0	10 - 86
Severe Acute Heart Disease	26	35	22 - 58	25	36	19 - 56
Severe Chronic Heart Disease	50	24	11 - 36	43	23	12 - 38
Severe Trauma	0	-	-	1	100	0 - 97
Gastrointestinal Disease	69	6	1 - 17	81	2	1 - 12
Gynecologic Disease	8	0	0 -100	6	17	0 -100
Low-Risk Heart Disease	89	1	1 - 8	109	5	1 - 12
Musculoskeletal/Skin Conditions	45	0	1 - 12	44	2	0 - 39
Neuropsychiatric/Sensory Disease	27	0	0 - 23	15	0	0 -100
Urologic Disease	36	3	0 - 43	31	3	0 - 77

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 86
Occupancy Rate (%): 57
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 29
Percent of Physicians Who Are Board Certified Specialists: 86
Interns and Residents: 0
Registered Nurses: 57
Licensed Practical Nurses: 31

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

LIBERTY MEDICAL CNTR

730 ASHBURTON ST
BALTIMORE, MD 21216

Medicare Hospital Provider Number: 210059

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,553	16	11 - 16	811	14	11 - 17
Cancer	29	48	20 - 57	18	50	27 - 72
Cerebrovascular Accidents	88	28	18 - 38	40	13	19 - 42
Gastrointestinal Catastrophes	9	44	8 - 68	9	22	7 - 63
Infectious Disease	43	42	21 - 53	14	36	22 - 71
Metabolic/Electrolyte Disorders	54	20	15 - 43	50	28	12 - 42
Pulmonary Disease	92	30	23 - 44	41	34	17 - 47
Renal Failure	10	70	17 - 78	4	25	9 - 86
Severe Acute Heart Disease	29	55	23 - 59	15	40	16 - 63
Severe Chronic Heart Disease	107	22	14 - 31	56	23	15 - 39
Severe Trauma	1	0	1 - 97	0	-	-
Gastrointestinal Disease	76	16	1 - 24	48	6	0 - 26
Gynecologic Disease	2	0	0 - 99	1	0	0 -100
Low-Risk Heart Disease	145	6	1 - 11	95	8	1 - 17
Musculoskeletal/Skin Conditions	67	4	1 - 16	31	3	0 - 34
Neuropsychiatric/Sensory Disease	212	0	0 - 9	85	1	0 - 16
Urologic Disease	54	4	1 - 18	27	4	0 - 40

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	282
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	4
Registered Nurses:	173
Licensed Practical Nurses:	33

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

LMC Liberty Medical Center Inc.

We *Do* Care

October 20, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

Re: Hospital I.D. No: 210059

Dear Ms. Kappert:

Liberty Medical Center would like to take this opportunity to comment on the Health Care Financing Administration's statistical data related to mortality for 1987. As you state in the HCFA report, and we agree, the data requires careful validation and assessment by each individual hospital to allow for appropriate interpretation. We believe that your understanding of this is critical and our participation in the Maryland Hospital Association's Quality Indicator Project demonstrates our commitment. Even though HCFA has offered a pre-packaged medicare mortality prediction system to hospitals, the data continues to lack risk and severity adjustment, as well as adjustments for age.

We believe that although this data has the potential to assist us in continuing to measure the quality of service provided to our patients, severity and age adjustments would assist the public in understanding the data without drawing inappropriate conclusions. It is our impression that by using appropriate indicators, such as mortality, if defined correctly, hospitals can measure performance and allow for improvement in the services they render. We are confident that the internal reviews we conduct allow us to evaluate our performance, in conjunction with the data that HCFA and our hospital association provides.

An analysis of the HCFA Liberty data has allowed us to identify certain factors which we believe influence our mortality rates. For example, 86% of all admissions to Liberty Medical Center were of an emergency nature in 1987. Emergency admissions tend to have a higher acquity of illness. Also, the average age for all of our Medicare patients is 77.1 years and this elderly group represents 49% of all the patients we treat. In addition, approximately 9% of our patient population tend to be admitted from a nursing home and have multiple medical problems on admission.

The characteristics of our unique patient population are due to the fact that Liberty Medical Center has made a commitment to the community and has ongoing agreements with approximately 40 Nursing Homes. We are a primary health care facility for providing acute care services for these patients. It has been our experience that this population usually has more medical complications on admission. This approximately 9% of total admissions, tends to skew our data based on age and other complications.

We also treat patients in a community which has well above average social and economic problems. Hypertension, drug abuse, and cardiac disease illnesses are prevalent. Again, we recognize this as our mission and will continue our commitment to servicing these patients and this community. We ask your continued understanding of our work and the parameters we face everyday.

Overall, Liberty Medical Center feels that this data developed by HCFA is a significant quality indicator that can compliment our overall Quality Assurance Program. We feel that it is useful data that allows us to continue to improve our quality of patient care, as well as help us clearly understand and review all deaths. Liberty Medical Center's Quality Assurance Program currently includes a review of all deaths, and we intend to use the HCFA data in our continuing quality reviews.

Sincerely,

William L. Jews
President

WLJ/am

MARYLAND GEN HOSP

827 LINDEN AVE
BALTIMORE, MD 21201

Medicare Hospital Provider Number: 210038

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,605	14	10 - 15	1,543	13	10 - 15
Cancer	51	47	30 - 59	63	43	30 - 58
Cerebrovascular Accidents	65	15	19 - 38	54	26	15 - 40
Gastrointestinal Catastrophes	12	17	12 - 59	15	40	10 - 60
Infectious Disease	29	41	17 - 55	26	46	17 - 57
Metabolic/Electrolyte Disorders	51	20	11 - 40	39	31	12 - 45
Pulmonary Disease	90	39	18 - 41	77	23	14 - 36
Renal Failure	7	43	12 - 80	18	56	15 - 72
Severe Acute Heart Disease	49	51	27 - 56	53	43	24 - 52
Severe Chronic Heart Disease	102	24	15 - 33	70	14	14 - 33
Severe Trauma	0	-	-	4	50	4 - 82
Gastrointestinal Disease	83	2	1 - 11	75	5	1 - 16
Gynecologic Disease	9	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	177	5	1 - 9	190	3	1 - 8
Musculoskeletal/Skin Conditions	87	3	0 - 16	96	1	0 - 12
Neuropsychiatric/Sensory Disease	116	3	0 - 11	154	1	0 - 8
Urologic Disease	69	1	0 - 37	56	2	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 229
Occupancy Rate (%): 78
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 280
Percent of Physicians Who Are Board Certified Specialists: 44
Interns and Residents: 41
Registered Nurses: 242
Licensed Practical Nurses: 22

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

MARYLAND GENERAL HOSPITAL

827 Linden Avenue
Baltimore, Maryland 21201
301 225-8000

MEDICARE PROVIDER NO. 21-0038

October 21, 1988

William M. Roper, M.D.
Administrator
Health Care Financing Administration
Washington, DC 20201

Dear Dr. Roper:

This letter is in response to mortality information for Maryland General Hospital as compiled by HCFA and released to my office on October 7, 1988. We have completed our review of your information. HCFA information has been compared with similar data available to us through our internal quality assurance program which has mortality review as one of its components. Based upon HCFA methodology, our mortality rates fall within "acceptable" ranges.

We believe that mortality data is one screening tool available to hospitals for focusing the peer review process. However, mortality rates by themselves do not measure quality, nor should they every be used to reach conclusions regarding quality of care. Mortality can only suggest the possibility of quality problems, not the probability. It is only through actual case review by trained professionals that quality judgements can be made.

Quality of care is of utmost concern to the hospital's governing board, management and medical staff. Because of its importance, Maryland General Hospital provides a comprehensive ongoing quality assurance system to monitor quality of care. Any indication of a potential quality problem, including a mortality rate higher or lower than predicted, leads to a prompt investigation to determine if a problem, in fact, exists. If a problem is identified, corrective action is taken promptly.

As to an attempt to compare Maryland General Hospital to the "average" hospital as defined by HCFA, it should be noted that our patients are at times unusually complex or have characteristics not recognized by the HCFA model. Specifically, severity of illness at the time of admission was not considered in the HCFA model. Maryland General Hospital receives significant numbers of complicated referrals from specialists and other hospitals in the areas of infectious diseases, pulmonary medicine, gastroenterology and nephrology. In addition, approximately 35% of all admissions are directly from our emergency room. Also not measured by HCFA was the impact of patients transferred to the hospital from nursing homes which is a significant portion of our activity.

Another characteristic which was not included relates to general health and well-being of patients.

Actual mortality rates for a hospital could be higher or lower than predicted when such characteristics as mentioned above are considered. The importance of using mortality data as a screening tool and not a measure of quality cannot be understated. Quality can only be evaluated through a comprehensive ongoing review process.

As to specific errors in the data supplied by HCFA, we found that the following medical record numbers were incorrect:

Health Insurance Claim Number	Correct Medical Record Number
[redacted]	[redacted]

We appreciate the opportunity given to respond to the HCFA report. We believe review of mortality data should be a component of any process designed to review quality of patient care.

Sincerely,

J. R. Wood
President

/bjo

MEM HOSP AND MED CTR CUMBERLAND INC

600 MEMORIAL AVE
CUMBERLAND, MD 21502

Medicare Hospital Provider Number: 210025

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,149	13	11 - 15	2,257	12	10 - 15
Cancer	90	51	36 - 60	62	56	32 - 60
Cerebrovascular Accidents	85	20	17 - 36	91	20	18 - 36
Gastrointestinal Catastrophes	21	29	21 - 62	24	33	18 - 58
Infectious Disease	30	40	20 - 57	40	35	22 - 55
Metabolic/Electrolyte Disorders	25	16	9 - 44	32	13	11 - 41
Pulmonary Disease	123	28	17 - 35	132	30	17 - 36
Renal Failure	8	13	9 - 70	12	83	20 - 76
Severe Acute Heart Disease	78	45	26 - 49	71	44	27 - 51
Severe Chronic Heart Disease	149	23	17 - 32	142	20	18 - 33
Severe Trauma	5	0	7 - 65	2	0	4 - 89
Gastrointestinal Disease	150	3	1 - 9	138	2	2 - 8
Gynecologic Disease	5	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	332	3	2 - 6	330	2	2 - 6
Musculoskeletal/Skin Conditions	177	2	1 - 7	189	2	1 - 7
Neuropsychiatric/Sensory Disease	79	3	1 - 13	82	5	1 - 15
Urologic Disease	48	4	0 - 44	81	2	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	229
Occupancy Rate (%):	70
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	79
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	248
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

The Memorial Hospital & Medical Center of Cumberland, Inc.
600 Memorial Avenue Cumberland, Maryland 21502 (301)777-4000

Hospital ID: 210025

October 10, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

Dear Sirs:

We have received Medicare Hospital Mortality Information (1987) and reviewed all categories. While we submit that these data are incompletely adjusted for severity of illness, we are gratified that in all categories we fall within the range for predicted mortality. In only two areas do we identify our death rate percentage as approaching the upper end of the range for predicted mortality. In both of those areas (cancer and severe acute heart disease) I have personally performed a chart review of each patient involved. This chart review has confirmed that in virtually all cases, death could have been predicted at time of admission given consideration of the presentation of the patient or the existence of concurrent conditions which greatly complicated care.

In sum, we are gratified to find external statistical evidence to support our belief that our institution continues to offer an exceptional level of quality care.

Sincerely,

George B. Stoltzfus, M.D.
Vice-President
Medical Affairs

GBS/sd

MEMORIAL HOSP AT EASTON

219 S WASHINGTON ST
EASTON, MD 21601

Medicare Hospital Provider Number: 210037

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,281	13	10 - 14	2,101	13	10 - 15
Cancer	97	46	29 - 53	101	45	28 - 51
Cerebrovascular Accidents	93	30	17 - 37	96	22	17 - 35
Gastrointestinal Catastrophes	20	55	12 - 57	20	20	16 - 55
Infectious Disease	24	25	17 - 54	15	73	16 - 62
Metabolic/Electrolyte Disorders	29	17	9 - 42	21	24	8 - 49
Pulmonary Disease	118	21	16 - 34	88	30	15 - 37
Renal Failure	11	27	10 - 70	9	22	12 - 75
Severe Acute Heart Disease	102	30	26 - 46	95	33	29 - 50
Severe Chronic Heart Disease	138	22	15 - 30	121	25	15 - 32
Severe Trauma	2	50	2 - 92	4	25	4 - 80
Gastrointestinal Disease	120	4	1 - 11	135	4	1 - 11
Gynecologic Disease	28	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	212	2	2 - 7	228	3	1 - 7
Musculoskeletal/Skin Conditions	228	5	1 - 8	198	3	1 - 8
Neuropsychiatric/Sensory Disease	108	6	0 - 16	79	4	1 - 15
Urologic Disease	103	2	0 - 14	81	1	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	208
Occupancy Rate (%):	87
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	79
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	0
Registered Nurses:	175
Licensed Practical Nurses:	27

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MERCY HOSP INC

301 ST PAUL PLACE
BALTIMORE, MD 21202

Medicare Hospital Provider Number: 210008

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,067	10	9 - 13	2,074	11	9 - 14
Cancer	88	35	33 - 57	111	44	31 - 55
Cerebrovascular Accidents	54	19	14 - 37	61	25	15 - 38
Gastrointestinal Catastrophes	17	29	13 - 58	15	27	10 - 57
Infectious Disease	11	45	12 - 67	10	40	13 - 69
Metabolic/Electrolyte Disorders	33	15	11 - 42	26	27	11 - 49
Pulmonary Disease	108	29	19 - 39	96	25	15 - 36
Renal Failure	14	29	14 - 71	11	27	14 - 74
Severe Acute Heart Disease	47	49	24 - 53	77	26	27 - 48
Severe Chronic Heart Disease	111	18	16 - 32	85	24	15 - 35
Severe Trauma	5	0	8 - 66	0	-	-
Gastrointestinal Disease	142	1	1 - 6	128	2	1 - 9
Gynecologic Disease	10	0	0 -100	18	0	0 -100
Low-Risk Heart Disease	242	5	1 - 8	275	1	2 - 6
Musculoskeletal/Skin Conditions	197	2	0 - 7	184	2	0 - 8
Neuropsychiatric/Sensory Disease	69	1	0 - 13	122	1	1 - 7
Urologic Disease	129	2	0 - 12	101	2	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	290
Occupancy Rate (%):	77
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	389
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	18
Registered Nurses:	309
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MERCY
MEDICAL
CENTER
A University Affiliated Center
Conducted By The Sisters Of Mercy
301 Saint Paul Place • Baltimore, MD 21202-2165 • 301-332-9000

October 13, 1988

Mrs. Sandra Kappert
Health Standards &
Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Response to HCFA Medicare Hospital Mortality Information - Mercy Hospital, Inc., 301 St. Paul Place, Baltimore, Maryland 21201

Dear Ms. Kappert:

In review of the information provided by HCFA, Mercy finds the general hospital characteristics to be inaccurate. Mercy is listed in the 1986 AHA Guide as having 348 beds and a 66.7% occupancy rate. HCFA's report lists Mercy as having 180 beds and a 76% occupancy rate. Mercy would appreciate a correction in this discrepancy. Mercy presently has 285 beds and a 77% occupancy rate.

Also, please note that Mercy Hospital, Inc. has been changed to Mercy Medical Center, Inc.

Respectfully submitted,

Sister Mary Thomas

Sister Mary Thomas, RSM
President

Northeast Medical Center • Mercy Southern • Mercy Little Italy • Mercy Basilica Place • Irvins Professional Building

MONTGOMERY GENERAL HOSPITAL INC

18101 PRINCE PHILIP DRIVE
OLNEY, MD 20832

Medicare Hospital Provider Number: 210018

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,363	11	9 - 13	1,287	11	8 - 13
Cancer	32	53	24 - 60	39	31	27 - 59
Cerebrovascular Accidents	48	29	15 - 42	46	26	14 - 41
Gastrointestinal Catastrophes	11	36	14 - 68	6	0	14 - 65
Infectious Disease	14	50	13 - 63	12	17	15 - 61
Metabolic/Electrolyte Disorders	21	14	11 - 47	12	0	10 - 44
Pulmonary Disease	57	30	14 - 39	45	18	14 - 40
Renal Failure	9	44	9 - 75	5	60	10 - 84
Severe Acute Heart Disease	57	33	25 - 51	71	46	29 - 53
Severe Chronic Heart Disease	61	21	14 - 36	57	26	13 - 37
Severe Trauma	5	0	8 - 66	0	-	-
Gastrointestinal Disease	83	4	0 - 17	69	10	0 - 27
Gynecologic Disease	17	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	141	1	1 - 7	185	1	1 - 6
Musculoskeletal/Skin Conditions	116	3	0 - 10	114	3	0 - 11
Neuropsychiatric/Sensory Disease	102	0	0 - 7	104	2	0 - 17
Urologic Disease	59	0	0 - 24	66	0	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	229
Occupancy Rate (%):	63
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	125
Percent of Physicians Who Are Board Certified Specialists:	92
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NORTH ARUNDEL HOSPITAL

301 HOSPITAL DRIVE
GLEN BURNIE, MD 21061

Medicare Hospital Provider Number: 210043

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,838	12	10 - 14	2,677	11	9 - 13
Cancer	77	55	28 - 54	81	48	30 - 55
Cerebrovascular Accidents	106	16	16 - 32	87	25	16 - 36
Gastrointestinal Catastrophes	32	44	19 - 57	25	24	17 - 54
Infectious Disease	45	24	21 - 50	38	39	21 - 55
Metabolic/Electrolyte Disorders	42	26	10 - 42	47	32	12 - 43
Pulmonary Disease	156	22	17 - 34	161	23	16 - 33
Renal Failure	17	24	17 - 70	9	22	12 - 75
Severe Acute Heart Disease	112	47	29 - 50	102	34	26 - 47
Severe Chronic Heart Disease	188	19	17 - 30	174	20	16 - 30
Severe Trauma	2	0	1 - 89	4	0	4 - 72
Gastrointestinal Disease	190	3	1 - 7	198	2	1 - 6
Gynecologic Disease	21	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	462	2	2 - 5	448	2	2 - 5
Musculoskeletal/Skin Conditions	196	2	1 - 6	207	1	1 - 6
Neuropsychiatric/Sensory Disease	97	2	1 - 10	91	1	0 - 10
Urologic Disease	76	3	0 - 29	92	2	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	310
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	237
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	236
Licensed Practical Nurses:	40

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

NORTH CHARLES GNRL HOSP

2724 CHARLES ST
BALTIMORE, MD 21218

Medicare Hospital Provider Number: 210021

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,446	10	10 - 14	1,268	10	9 - 14
Cancer	39	46	26 - 59	34	44	28 - 63
Cerebrovascular Accidents	45	13	13 - 35	47	28	16 - 43
Gastrointestinal Catastrophes	3	67	2 - 86	9	0	18 - 58
Infectious Disease	65	35	23 - 51	19	32	20 - 63
Metabolic/Electrolyte Disorders	41	20	13 - 43	33	21	7 - 41
Pulmonary Disease	65	25	18 - 41	68	28	20 - 44
Renal Failure	6	17	7 - 75	6	50	12 - 84
Severe Acute Heart Disease	44	30	25 - 53	21	33	21 - 61
Severe Chronic Heart Disease	76	25	13 - 34	74	28	15 - 37
Severe Trauma	2	50	1 - 93	1	100	1 - 97
Gastrointestinal Disease	80	4	1 - 13	65	5	0 - 19
Gynecologic Disease	3	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	268	1	2 - 5	235	0	2 - 5
Musculoskeletal/Skin Conditions	73	4	0 - 18	83	4	1 - 14
Neuropsychiatric/Sensory Disease	105	2	1 - 10	97	0	1 - 7
Urologic Disease	47	0	0 - 29	37	0	0 - 43

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	196
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	187
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	0
Registered Nurses:	207
Licensed Practical Nurses:	25

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

PARKWOOD HOSPITAL

8910 WOODYARD ROAD
CLINTON, MD 20735

Medicare Hospital Provider Number: 210047

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	35	6	5 - 24	40	12	3 - 27
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	2	50	2 - 92
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	1	0	0 - 97
Metabolic/Electrolyte Disorders	2	0	0 - 97	0	-	-
Pulmonary Disease	1	0	2 - 98	5	20	1 - 77
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	4	25	3 - 80
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	1	0	0 -100	3	33	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	4	0	0 -100
Musculoskeletal/Skin Conditions	7	0	0 -100	7	0	0 -100
Neuropsychiatric/Sensory Disease	1	0	0 -100	0	-	-
Urologic Disease	1	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	33
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

Parkwood Hospital
8910 WOODYARD ROAD
CLINTON, MARYLAND 20735

(301) 868-2700

October 19, 1988

William L. Roper, M.D., Administrator
Health Care Financing Administration
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Medicare Provider # 210047

Dear Dr. Roper:

Thank you for your letter of September 15, 1988 regarding Hospital Mortality Information on Medicare patients, and for giving us an opportunity to review and comment on the Report. At this time, we would also like to express our commitment to helping the general public understand the reasons for the deaths.

Our review findings and conclusions are listed below:

1. The data continued to reflect on the type of cases we admit and the level of services we provide at our facility.

2. Services rendered to the identified cases who died within 30 days of their hospital admission dates were medically necessary. There were no deviations from the standard of care.

3. We are in total agreement with the Department that the fewer the number of cases included in a given diagnostic category, the greater the uncertainty of expected mortality range and therefore, the wider the range.

4. There were minor data discrepancies found and corrections are appended to our comments.

5. Given the patients' medical problems upon admission and other pre-existing conditions, they were not expected to survive. Death was the eventual outcome of their progressing disease processes.

If we can be of further assistance in this important project, please let us know.

Sincerely,

May Sarmiento

May Sarmiento, R.N.
Administrator

DATA DISCREPANCY

Medicare Provider # 210047

(a) The number for "all causes" recorded was 35 instead of 22. Actual mortality rate and range for predicted mortality will need to be adjusted.

(b) The number for pulmonary disease recorded was 1 instead of 4. Actual mortality rate and range for predicted mortality will need to be adjusted.

(c) "Hospital characteristics" recorded reflect 1986 information on previous ownership and staffing patterns. The facility was purchased by the Greater Southeast Community Hospital Foundation in July 1986.

(d) There were no cases recorded for severe chronic heart disease, however there were 3 discharges listed with congestive heart failure on the "1987 Discharges Eligible For MMPS Abstraction" report.

(e) Correct number of cases have been recorded on "Medicare Hospital Mortality Information" report.

PENINSULA GENL HOSP

100 E CARROLL AVE
SALISBURY , MD 21801

Medicare Hospital Provider Number: 210019

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,391	11	10 - 14	4,078	12	10 - 14
Cancer	182	43	31 - 51	165	35	31 - 51
Cerebrovascular Accidents	163	24	18 - 34	152	26	19 - 35
Gastrointestinal Catastrophes	35	34	20 - 55	26	27	16 - 54
Infectious Disease	50	40	17 - 48	30	33	18 - 55
Metabolic/Electrolyte Disorders	81	16	14 - 38	92	25	13 - 38
Pulmonary Disease	145	19	16 - 33	160	22	15 - 32
Renal Failure	10	30	14 - 76	17	65	19 - 75
Severe Acute Heart Disease	169	28	28 - 45	167	38	28 - 46
Severe Chronic Heart Disease	312	22	18 - 29	249	20	17 - 29
Severe Trauma	8	13	5 - 61	6	50	6 - 76
Gastrointestinal Disease	303	3	2 - 7	281	2	1 - 6
Gynecologic Disease	22	0	0 -100	25	0	0 -100
Low-Risk Heart Disease	751	3	2 - 5	677	3	2 - 6
Musculoskeletal/Skin Conditions	258	3	1 - 7	282	4	1 - 7
Neuropsychiatric/Sensory Disease	196	4	0 - 9	197	2	1 - 6
Urologic Disease	141	3	0 - 11	110	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	372
Occupancy Rate (%):	82
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	149
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	0
Registered Nurses:	390
Licensed Practical Nurses:	79

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

PHYSICIANS MEMORIAL HOSPITAL

701 E CHARLES STREET
LA PLATA, MD 20646

Medicare Hospital Provider Number: 210035

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	851	13	10 - 16	873	15	10 - 16
Cancer	24	67	25 - 63	14	50	23 - 72
Cerebrovascular Accidents	34	12	16 - 40	47	28	15 - 42
Gastrointestinal Catastrophes	6	33	9 - 75	4	75	7 - 81
Infectious Disease	12	67	20 - 71	14	36	17 - 66
Metabolic/Electrolyte Disorders	16	13	5 - 46	27	30	11 - 49
Pulmonary Disease	53	32	15 - 42	41	39	12 - 43
Renal Failure	2	50	2 - 92	7	29	12 - 79
Severe Acute Heart Disease	39	26	26 - 55	43	33	24 - 53
Severe Chronic Heart Disease	47	23	13 - 39	61	23	15 - 37
Severe Trauma	4	0	4 - 71	0	-	-
Gastrointestinal Disease	53	6	0 - 24	67	4	0 - 21
Gynecologic Disease	4	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	98	2	1 - 9	94	0	1 - 6
Musculoskeletal/Skin Conditions	82	2	1 - 12	69	1	0 - 14
Neuropsychiatric/Sensory Disease	17	0	0 - 73	19	0	0 - 70
Urologic Disease	24	0	0 - 42	32	0	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 100
Occupancy Rate (%): 74
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 44
Percent of Physicians Who Are Board Certified Specialists: 57
Interns and Residents: 0
Registered Nurses: 74
Licensed Practical Nurses: 4

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

PHYSICIANS
MEMORIAL
HOSPITAL

October 20, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards & Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, Maryland 21207

Ref: Physicians Memorial Hospital
Medicare Provider #210035

Dear Doctor Roper:

The following are Physicians Memorial Hospital's official comments regarding mortality data for Medicare beneficiaries in 1987.

Physicians Memorial Hospital supports the public disclosure of the Medicare mortality data. It should be additionally noted that data is only one method of evaluating the quality of hospital care. Our hospital participates with the Joint Commission on Accreditation of Healthcare Organizations, which requires hospitals to meet other standards for evaluating quality care in addition to mortality rates. Physicians Memorial Hospital is also presently engaged in a two-year, state-wide quality indicator project with other hospitals in the state of Maryland. Of the ten quality indicators developed for this project, mortality rates are only one component of the evaluation. Another aspect of our overall assessment of quality of patient care is to conduct monthly reviews of mortality cases by each of our clinical departments. The hospital also has ongoing programs for Utilization Review, Risk Management, and Infection Control. The medical staff also has several committees to evaluate patient care as follows: Tissue & Transfusion Committee, Pharmacy & Infection Control Committee, Credentials Committee, Critical Care Committee, Trauma Committee, and Quality Assurance Committee.

The Health Care Financing Administration (HCFA) has stated to hospitals that they have done their best to eliminate any discrepancies in the data or the computer programs used to analyze this information and has requested hospitals to verify the accuracy of the information presented to the hospitals.

PHYSICIANS MEMORIAL HOSPITAL

In our preliminary verification process, the following characteristics are incorrect and should be corrected as listed below:

Survey and Year: AHA 1986

	INCORRECT	CORRECT
Beds:	77	100
Occupancy Rate (%):	79%	74%
Staffing:		
Total Number of Physicians:	47	100
Percent of Physicians who are Board Certified Specialists:	36	60
Specialty Services:		
Coronary Care Unit	NO	YES (6 bed ICU/CCU Unit)
Organ Transplant Service:	YES	NO (Cornea Tissue/Organ, No.)

Physicians Memorial Hospital will continue to analyze the information presented in addition to the other existing mechanisms listed above for evaluating patient care.

Thank you for your attention to this matter.

Very truly yours,

Robert T. Jetland

Robert T. Jetland
Administrator

PRINCE GEORGES GENL HOSPITAL

1 HOSPITAL DR
CHEVERLY, MD 20785

Medicare Hospital Provider Number: 210003

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,686	13	10 - 14	1,699	12	9 - 14
Cancer	50	32	25 - 53	46	33	28 - 58
Cerebrovascular Accidents	81	30	15 - 36	72	25	17 - 39
Gastrointestinal Catastrophes	23	48	14 - 56	8	63	12 - 73
Infectious Disease	33	27	21 - 55	18	50	12 - 58
Metabolic/Electrolyte Disorders	31	19	8 - 42	31	23	10 - 44
Pulmonary Disease	77	30	15 - 38	77	29	14 - 37
Renal Failure	10	40	6 - 71	16	0	12 - 59
Severe Acute Heart Disease	36	44	25 - 58	65	40	25 - 50
Severe Chronic Heart Disease	102	17	15 - 31	82	18	15 - 33
Severe Trauma	7	29	6 - 70	7	14	6 - 66
Gastrointestinal Disease	118	2	1 - 8	131	1	1 - 6
Gynecologic Disease	10	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	226	6	2 - 9	223	6	1 - 9
Musculoskeletal/Skin Conditions	137	3	1 - 9	147	3	1 - 8
Neuropsychiatric/Sensory Disease	96	3	0 - 14	118	4	0 - 17
Urologic Disease	49	0	0 - 15	44	0	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	458
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	344
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	68
Registered Nurses:	375
Licensed Practical Nurses:	55

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SACRED HEART HOSPITAL

900 SETON DRIVE
CUMBERLAND, MD 21502

Medicare Hospital Provider Number: 210027

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,252	11	10 - 14	2,096	11	10 - 15
Cancer	78	54	37 - 63	89	48	33 - 58
Cerebrovascular Accidents	76	18	18 - 37	72	14	17 - 35
Gastrointestinal Catastrophes	22	41	20 - 62	13	31	14 - 64
Infectious Disease	14	36	14 - 63	13	15	20 - 63
Metabolic/Electrolyte Disorders	28	36	17 - 55	31	29	23 - 58
Pulmonary Disease	98	32	18 - 39	109	24	19 - 38
Renal Failure	7	0	22 - 77	7	29	10 - 78
Severe Acute Heart Disease	79	39	28 - 51	75	35	28 - 52
Severe Chronic Heart Disease	134	27	16 - 33	119	25	16 - 34
Severe Trauma	3	0	5 - 79	5	60	7 - 79
Gastrointestinal Disease	133	2	1 - 8	162	3	1 - 8
Gynecologic Disease	16	0	0 -100	25	4	0 - 99
Low-Risk Heart Disease	343	2	2 - 6	265	3	2 - 7
Musculoskeletal/Skin Conditions	170	1	1 - 6	160	2	1 - 7
Neuropsychiatric/Sensory Disease	241	2	1 - 6	271	1	1 - 5
Urologic Disease	94	1	0 - 10	63	3	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	240
Occupancy Rate (%):	73
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	104
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	216
Licensed Practical Nurses:	42

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Sacred Heart Hospital

P.O. Box 539 900 Seton Drive Cumberland, Maryland 21502 301-759-4200

Medicare Provider # 21-00-27

October 6, 1988

Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Attention: Mrs. Sandra Kappert

Dear Mrs. Kappert:

Thank you very much for the opportunity to comment on the Mortality Information that will be released by HCFA.

The first correction we would ask for, is the Hospital Characteristics Section is in error in two areas. We do have a Coronary Care Unit and we do have a Hospice care program, both inpatient and outpatient. We would appreciate having that corrected.

Sacred Heart Hospital would like to go on record noting that the effort at accessing quality by HCFA is certainly laudable. It is a help to look at each piece of information in relation to the whole.

We would again caution HCFA, the public and regulatory agencies against using mortality information on such a global level to draw any conclusions. Certainly mortality information is one aspect of a comprehensive quality care program in any hospital.

Thank you very much for the opportunity to comment.

Sincerely,

Sister Carol

Sister Carol Keehan
President

SCK/csg

SHADY GROVE ADVENTIST HOSP

9901 MEDICAL CTR DRIVE
ROCKVILLE, MD 20850

Medicare Hospital Provider Number: 210057

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**	**Cases**	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**
All Cases	1,520	14	11 - 15	1,445	15	11 - 16
Cancer	41	39	26 - 58	54	41	27 - 56
Cerebrovascular Accidents	85	31	18 - 39	61	23	18 - 40
Gastrointestinal Catastrophes	23	26	20 - 59	14	36	20 - 70
Infectious Disease	18	50	14 - 60	18	56	20 - 65
Metabolic/Electrolyte Disorders	28	25	9 - 46	16	13	11 - 50
Pulmonary Disease	82	20	19 - 39	93	30	16 - 38
Renal Failure	6	33	3 - 77	6	33	10 - 81
Severe Acute Heart Disease	70	49	27 - 52	62	42	28 - 53
Severe Chronic Heart Disease	73	27	15 - 36	80	32	14 - 36
Severe Trauma	2	0	1 - 90	2	0	0 - 93
Gastrointestinal Disease	73	5	1 - 17	93	5	0 - 16
Gynecologic Disease	13	0	0 -100	11	9	0 -100
Low-Risk Heart Disease	159	4	1 - 9	161	6	1 - 10
Musculoskeletal/Skin Conditions	150	1	1 - 7	145	2	1 - 8
Neuropsychiatric/Sensory Disease	28	0	0 - 29	35	0	0 - 30
Urologic Disease	75	0	0 - 10	58	2	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	224
Occupancy Rate (%):	78
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	206
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	430
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Adventist
Hospital
CARING IS OUR FUTURE

Hospital ID: 210057

September 30, 1988

Health Standards and
Quality Bureau, HCFA
ATTN: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We received the Medicare Hospital Mortality Information (1987). We believe the mortality information is generally correct. However, the Hospital Characteristics information is totally inaccurate.

We are not sure of the source of the information utilized by HCFA. Provided below is the correct information for calendar year 1987.

Beds (#)	224
Occupancy Rate (%)	78.5
Ownership/Control:	Church
Staffing	
Total Number of Physicians:	857
Percent of Physicians who are Board Certified Specialists:	73.6
Interns and Residents per Bed:	0.00
Registered Nurses per Bed:	1.24
Licensed Practical Nurses per Bed:	0.00
Specialty Services	
Shock/Trauma or Burn Unit:	No
Coronary Care Unit:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Please make the corrections to your data. If you have any questions, please don't hesitate to contact me. Thank you for your attention to this matter.

Sincerely,

Michel Augsburger

Michel Augsburger
Vice President Research Planning
and Business Development

SINAI HOSPITAL

2401 WEST BELVEDERE AVE
BALTIMORE, MD 21215

Medicare Hospital Provider Number: 210012

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,290	12	11 - 15	3,220	12	11 - 15
Cancer	155	41	36 - 56	145	31	35 - 55
Cerebrovascular Accidents	124	31	19 - 37	101	21	19 - 37
Gastrointestinal Catastrophes	19	11	20 - 55	14	57	12 - 63
Infectious Disease	63	59	26 - 54	65	54	27 - 56
Metabolic/Electrolyte Disorders	30	30	10 - 47	34	24	11 - 45
Pulmonary Disease	131	31	19 - 38	125	26	17 - 36
Renal Failure	26	23	14 - 64	15	33	12 - 70
Severe Acute Heart Disease	142	29	33 - 51	180	37	34 - 51
Severe Chronic Heart Disease	157	25	17 - 32	141	13	17 - 31
Severe Trauma	7	43	7 - 73	10	10	13 - 61
Gastrointestinal Disease	242	2	2 - 6	205	1	1 - 6
Gynecologic Disease	32	0	0 -100	39	0	0 - 99
Low-Risk Heart Disease	366	4	2 - 6	365	4	2 - 7
Musculoskeletal/Skin Conditions	286	2	1 - 6	265	1	1 - 5
Neuropsychiatric/Sensory Disease	309	3	1 - 7	286	2	1 - 6
Urologic Disease	125	3	0 - 23	123	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 447
Occupancy Rate (%): 84
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: (not available)
Percent of Physicians Who Are Board Certified Specialists: (not available)
Interns and Residents: (not available)
Registered Nurses: (not available)
Licensed Practical Nurses: (not available)

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

SINAI
HOSPITAL OF
BALTIMORE

Executive Offices
301/578-5678

October 24, 1988

Medicare Provider No. 210012

COMMENTS ON THE HEALTH CARE FINANCING ADMINISTRATION HOSPITAL MORTALITY INFORMATION

Sinai Hospital of Baltimore is pleased to comment on the Medicare Hospital Mortality Information provided by the Health Care Financing Administration. The hospital supports making available to the public open and accurate information concerning quality of care. It is the hospital's belief that while mortality may be one legitimate indicator of quality, mortality data should not be used as the sole basis for judging quality of care provided by hospitals. Rather, this data should be used by hospitals to help focus quality assurance efforts.

Sinai Hospital's mortality rate for all causes is 12%, well within the predicted mortality range of 11 to 15%. The hospital exceeds the predicted mortality range in one Diagnostic Category, Infectious Disease, whose expected range was 26 to 54%. Sinai had sixty-three patients in this category with an actual mortality rate of 59%, or thirty-eight deaths that occurred within thirty days of admission. There are many factors that effect mortality rates and should be considered. Our analysis of the medical records of these patients shows the following:

- One patient listed as deceased did not die.
- Of the thirty-seven patients who died, nineteen were eighty years or older, five being ninety or older.
- Thirteen patients died within three days of admission, four of whom died within twenty-four hours of admission.
- All but three of the patients had multiple diagnoses.
- Coding problems were identified in ten cases. These patients did not have an Infectious Disease diagnosis as a principal diagnosis.
- 29 patients were in poor to critical condition on admission.

Our medical record review and analysis indicated that these patients were very elderly, high risk patients who were seriously ill on admission and in whom death was not an unexpected outcome.

SOUTH BALTIMORE GEN HOSP

3001 S HANOVER ST
BALTIMORE, MD 21230

Medicare Hospital Provider Number: 210034

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,456	14	10 - 15	2,404	12	10 - 15
Cancer	116	40	32 - 55	119	40	36 - 58
Cerebrovascular Accidents	68	25	16 - 38	75	21	16 - 37
Gastrointestinal Catastrophes	14	36	17 - 67	22	36	17 - 59
Infectious Disease	43	44	23 - 56	62	42	21 - 50
Metabolic/Electrolyte Disorders	58	21	11 - 39	59	20	12 - 39
Pulmonary Disease	134	24	15 - 33	124	24	17 - 35
Renal Failure	12	42	13 - 73	12	42	18 - 79
Severe Acute Heart Disease	95	37	26 - 47	92	28	27 - 47
Severe Chronic Heart Disease	107	25	14 - 32	89	18	16 - 34
Severe Trauma	3	33	2 - 86	1	0	0 - 99
Gastrointestinal Disease	142	7	1 - 12	148	4	1 - 10
Gynecologic Disease	30	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	346	3	2 - 6	344	3	1 - 6
Musculoskeletal/Skin Conditions	182	2	1 - 7	199	3	1 - 7
Neuropsychiatric/Sensory Disease	79	4	1 - 14	72	1	0 - 17
Urologic Disease	120	2	0 - 10	129	1	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 324
Occupancy Rate (%): 82
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 316
Percent of Physicians Who Are Board Certified Specialists: 61
Interns and Residents: (not available)
Registered Nurses: (not available)
Licensed Practical Nurses: (not available)

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

SOUTHERN MARYLAND HOSPITAL

7503 SURRATTS RD
CLINTON, MD 20735

Medicare Hospital Provider Number: 210054

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,109	17	10 - 14	2,057	15	10 - 15
Cancer	92	50	34 - 58	97	38	32 - 55
Cerebrovascular Accidents	61	28	17 - 40	75	29	16 - 38
Gastrointestinal Catastrophes	10	70	14 - 69	12	33	12 - 64
Infectious Disease	14	50	16 - 66	23	48	16 - 58
Metabolic/Electrolyte Disorders	46	35	11 - 43	60	27	12 - 41
Pulmonary Disease	97	41	15 - 37	90	27	14 - 36
Renal Failure	9	44	9 - 74	10	20	16 - 76
Severe Acute Heart Disease	56	43	25 - 52	63	44	27 - 53
Severe Chronic Heart Disease	128	38	15 - 33	114	41	16 - 35
Severe Trauma	4	50	2 - 83	1	0	0 - 99
Gastrointestinal Disease	152	6	1 - 11	153	4	1 - 9
Gynecologic Disease	6	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	250	9	1 - 10	257	3	2 - 7
Musculoskeletal/Skin Conditions	234	3	1 - 7	196	3	1 - 7
Neuropsychiatric/Sensory Disease	104	1	1 - 8	99	5	0 - 19
Urologic Disease	87	5	1 - 15	88	3	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	308
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

ST AGNES HOSPITAL

WILKENS CATON AVE
BALTIMORE, MD 21229

Medicare Hospital Provider Number: 210011

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,871	14	11 - 15	3,844	13	11 - 15
Cancer	175	37	34 - 54	192	35	30 - 50
Cerebrovascular Accidents	187	24	19 - 33	182	27	19 - 34
Gastrointestinal Catastrophes	39	21	21 - 52	49	35	20 - 52
Infectious Disease	32	53	22 - 58	34	44	19 - 55
Metabolic/Electrolyte Disorders	41	29	8 - 41	60	20	11 - 38
Pulmonary Disease	196	22	16 - 31	174	26	16 - 33
Renal Failure	23	52	21 - 74	22	41	19 - 73
Severe Acute Heart Disease	186	48	29 - 46	221	40	30 - 46
Severe Chronic Heart Disease	225	19	16 - 28	217	19	15 - 28
Severe Trauma	6	33	6 - 74	7	43	4 - 72
Gastrointestinal Disease	296	3	1 - 7	293	4	1 - 7
Gynecologic Disease	46	0	0 -100	57	0	0 -100
Low-Risk Heart Disease	450	3	2 - 6	459	3	1 - 6
Musculoskeletal/Skin Conditions	288	3	0 - 6	293	1	1 - 5
Neuropsychiatric/Sensory Disease	83	4	0 - 15	90	1	1 - 9
Urologic Disease	138	2	0 - 14	109	2	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	450
Occupancy Rate (%):	77
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	422
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	90
Registered Nurses:	516
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

St Agnes Hospital

Office of the President

October 18, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Medicare Provider #210011

Dear Mrs. Kappert:

We have reviewed the information provided by The Health Care Financing Administration concerning St. Agnes Hospital's experience regarding mortality of Medicare patients. We have, in the short time allowed, been able to review the report and offer the following comments. These comments speak to the validity of the data as well as their clinical significance. Additionally, we need to clarify certain of our hospital's published characteristics.

With respect to the actual data there are at least two important points to be made. First, the patients included in the report include those who died during and following hospitalization. We are unable to analyze the clinical course in patients who died following discharge, since there is no mechanism allowing us to be aware of these deaths in advance of the HCFA report. We are unable to comment on the care rendered by providers in the non-hospital sector. Secondly, in a clinical sense, it is impossible to comment on the death rates without an indicator/measure of severity of illness. Specifically, we have extensive penetration in our market for therapy of acute heart disease through a community-based outreach/education program. Our exposure for treating a weighted group, biased toward higher levels of severity, is obvious. The time frame allowed for meaningful analysis of this aspect of care, including severity of illness, is not sufficient.

We would like to correct several "hospital characteristics" which are to be published.

Beds - 428
Occupancy - 72%
Total number of physicians - 427
Percent of physicians who are board-certified specialists - 68%
Interns/Residents per bed - 0.22
Registered Nurses per bed - 1.28
Licensed Practical Nurses per bed - 0.05

Specialty Services:

Organ Transplant Service - No
Hospice Care - Yes

It must be stressed that mortality is only one aspect of quality measurement, and it is an aspect which, if taken out of context, can be most misleading. We are pleased to have the opportunity to respond to the HCFA mortality data release. The data to be published reinforce our internal quality assurance report.

Sincerely,

Sister Mary Louise

Sister Mary Louise
President

SrML:kh

ST JOSEPH HOSPITAL

7620 YORK RD
BALTIMORE, MD 21204

Medicare Hospital Provider Number: 210007

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,521	11	10 - 14	4,304	12	10 - 14
Cancer	159	41	31 - 52	160	43	30 - 51
Cerebrovascular Accidents	222	25	19 - 33	161	26	18 - 34
Gastrointestinal Catastrophes	42	17	21 - 50	36	33	17 - 52
Infectious Disease	59	39	22 - 51	75	27	21 - 47
Metabolic/Electrolyte Disorders	90	21	11 - 36	93	25	12 - 37
Pulmonary Disease	169	29	17 - 34	153	33	17 - 36
Renal Failure	13	69	17 - 75	11	64	16 - 77
Severe Acute Heart Disease	227	30	31 - 46	196	32	31 - 47
Severe Chronic Heart Disease	239	24	17 - 30	229	26	17 - 31
Severe Trauma	9	22	7 - 64	7	29	6 - 71
Gastrointestinal Disease	375	2	2 - 6	335	1	1 - 5
Gynecologic Disease	55	0	0 -100	54	0	0 -100
Low-Risk Heart Disease	749	2	2 - 5	738	4	2 - 5
Musculoskeletal/Skin Conditions	379	3	1 - 6	352	2	1 - 5
Neuropsychiatric/Sensory Disease	109	4	0 - 13	136	2	0 - 10
Urologic Disease	136	1	0 - 9	148	3	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	460
Occupancy Rate (%):	72
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	578
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	638
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SAINT JOSEPH HOSPITAL

A Regional Medical Center

7620 York Road
Towson, Maryland 21204

301 337 [illegible]

October 17, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Once again, Saint Joseph Hospital, Towson, Maryland applauds the Health Care Financing Administration for its concern about the quality of care for Medicare patients and for soliciting comments from hospitals on the hospital specific statistics.

As you know, statistical mortality information is only one indicator of quality of care and does not describe the entire breadth and scope of quality of care programs in hospitals. For example: The Quality Assurance Program at Saint Joseph Hospital includes:

1. Traditional Medical Staff Monitoring Programs (Tissue/Procedures Review, Blood Transfusion Review, Pharmacy and Therapeutics Review, Infection Surveillance, Utilization Management, Medical Record Review, etc.).

2. Department specific monitoring of quality of care for all Medical Staff and Non-Medical Staff Departments who are involved with medical care.

3. Hospital-wide Generic and Occurrence Screening Programs.

4. Clinical review of the case of every patient who dies at Saint Joseph Hospital.

(CONTINUED)

Page 2
Mrs. Sandra Kappert
October 17, 1988

We are pleased that the actual mortality rate for all seventeen (sixteen specific and the one overall category) categories falls within the "range for predicted mortality" for calendar years 1987 and 1986. I know you will agree, however, that any finite statement about the quality of care provided by any health care institution requires a much more extensive review than the statistic analysis of a hospital's mortality experience.

We note that the hospital characteristics that were included on the statistical sheet for this hospital contains incorrect information. The correct information is attached to this document for your use.

Sincerely,

Sr. Marie Cecilia, osf

Sister Marie Cecilia, O.S.F.
President

SMC:sbm

ATTACHMENT

cc: Dr. Robert Mahon
Dr. W. Carl Ebeling
Heads, Major Medical Departments

ST MARYS HOSP

50 JEFFERSON ST
LEONARDTOWN, MD 20650

Medicare Hospital Provider Number: 210028

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	847	13	10 - 16	890	16	11 - 17
Cancer	31	65	33 - 68	32	69	31 - 65
Cerebrovascular Accidents	32	47	12 - 47	39	38	15 - 46
Gastrointestinal Catastrophes	8	25	9 - 68	6	17	11 - 73
Infectious Disease	5	20	10 - 77	7	57	11 - 76
Metabolic/Electrolyte Disorders	16	31	9 - 56	18	33	8 - 54
Pulmonary Disease	48	40	16 - 45	73	27	14 - 37
Renal Failure	1	100	1 -100	6	83	16 - 83
Severe Acute Heart Disease	35	31	25 - 56	41	29	23 - 52
Severe Chronic Heart Disease	50	22	13 - 37	42	31	17 - 45
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	81	2	0 - 13	84	2	1 - 11
Gynecologic Disease	4	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	131	2	2 - 8	121	3	2 - 10
Musculoskeletal/Skin Conditions	68	1	1 - 11	61	5	0 - 23
Neuropsychiatric/Sensory Disease	17	0	0 - 93	27	4	0 - 62
Urologic Disease	36	0	0 - 24	38	3	0 - 39

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	92
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	47
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	0
Registered Nurses:	61
Licensed Practical Nurses:	28

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

SUBURBAN HOSP ASSOC

8600 OLD GEORGETOWN RD
BETHESDA, MD 20814

Medicare Hospital Provider Number: 210022

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,351	11	10 - 14	2,348	11	10 - 15
Cancer	73	34	27 - 53	73	29	27 - 52
Cerebrovascular Accidents	83	28	19 - 40	107	19	19 - 36
Gastrointestinal Catastrophes	22	32	19 - 60	17	35	18 - 63
Infectious Disease	36	25	19 - 51	40	35	19 - 52
Metabolic/Electrolyte Disorders	40	25	11 - 43	28	14	12 - 45
Pulmonary Disease	125	30	16 - 35	147	27	21 - 39
Renal Failure	15	53	18 - 75	12	58	15 - 76
Severe Acute Heart Disease	104	35	29 - 50	112	35	32 - 52
Severe Chronic Heart Disease	96	19	14 - 32	85	33	15 - 37
Severe Trauma	10	20	9 - 62	11	27	6 - 61
Gastrointestinal Disease	141	2	1 - 8	138	6	1 - 11
Gynecologic Disease	7	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	260	2	2 - 6	228	4	1 - 7
Musculoskeletal/Skin Conditions	279	2	1 - 6	301	2	1 - 5
Neuropsychiatric/Sensory Disease	142	1	1 - 7	133	2	1 - 8
Urologic Disease	89	1	0 - 11	89	3	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	296
Occupancy Rate (%):	83
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	301
Percent of Physicians Who Are Board Certified Specialists:	88
Interns and Residents:	0
Registered Nurses:	329
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SUBURBAN
HOSPITAL

Suburban Hospital

8600 Old Georgetown Road
Bethesda, Maryland 20814
Telephone 301 530-3100

October 20, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We have reviewed the Medical Hospital Mortality Data and do not wish to comment on it. We do, however, wish to correct the Hospital Characteristics portion of the report. The corrected data is attached.

Thank you for the opportunity to review and comment on the mortality data.

Sincerely,

Joan Finnerty

Joan Finnerty
President

JF/cg

UNION HOSP CECIL COUNTY

106 SINGERLY AVENUE
ELKTON, MD 21921

Medicare Hospital Provider Number: 210032

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,150	11	10 - 15	1,162	12	9 - 14
Cancer	23	43	21 - 62	43	40	25 - 57
Cerebrovascular Accidents	36	17	15 - 41	37	24	16 - 44
Gastrointestinal Catastrophes	3	33	11 - 91	10	30	4 - 63
Infectious Disease	15	40	9 - 58	10	10	9 - 55
Metabolic/Electrolyte Disorders	22	27	7 - 48	23	26	4 - 46
Pulmonary Disease	77	13	16 - 34	79	33	15 - 38
Renal Failure	3	33	4 - 87	1	100	1 - 97
Severe Acute Heart Disease	76	43	27 - 51	62	39	25 - 50
Severe Chronic Heart Disease	67	19	17 - 38	63	27	13 - 36
Severe Trauma	0	-	-	1	0	1 - 97
Gastrointestinal Disease	91	1	1 - 9	103	1	1 - 8
Gynecologic Disease	8	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	160	5	1 - 10	160	1	1 - 6
Musculoskeletal/Skin Conditions	84	1	0 - 10	93	1	0 - 15
Neuropsychiatric/Sensory Disease	56	2	0 - 19	47	2	0 - 46
Urologic Disease	55	0	0 - 34	49	0	0 - 28

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 139
Occupancy Rate (%): 66
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 74
Percent of Physicians Who Are Board Certified Specialists: 64
Interns and Residents: 0
Registered Nurses: 135
Licensed Practical Nurses: 45

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

UNION HOSPITAL
OF CECIL COUNTY
ELKTON, MARYLAND 21921
301/398-4000

October 6, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, MD 21207

Attn: Sandra Kappert Hospital ID: 210032

Dear Ms. Kappert:

The mortality review has been completed on all our mortality cases. We re-revived those mortality cases that fell in the three categories in which our hospital's actual mortality rate fell in the upper half of the expected range. (We did not exceed the expected range in any category.) None of those patients died because of poor medical care. All of them died because of the severity of their illness.

The following cases had incorrect data:

Cancer:
[redacted] - [redacted] - expired [redacted] instead of [redacted]

Severe Acute Heart Disease:
[redacted]. - [redacted]- expired [redacted] instead of [redacted].
[redacted]- [redacted]- expired [redacted] instead of [redacted]

Please note on the copy of the "Medicare Hospital Mortality Information" sheet in the column, "Hospital Characteristics", that our total number of beds for the present is 166, the total number of physicians 108, and the total number of registered nurses per bed is 1.19.

In the column, "Speciality Services" please note that we do have an intensive care unit that accepts cardiac and surgical patients.

MEMBER:
AMERICAN HOSPITAL ASSOC.
MARYLAND HOSPITAL ASSOC.

APPROVED BY:
THE JOINT COMMISSION ON
ACCREDITATION OF HOSPITALS

If you have any further questions concerning our mortality review or our hospital data, please do not hesitate to call me.

Sincerely,

UNION HOSPITAL OF CECIL COUNTY

Henry Farkas, MD

Henry Farkas, M.D.
Chairman
Joint Quality Assurance Committee

David Grupenhoff
Administrator

Janette Lowman, RN

Janette Lowman, R.N.
Q.A./U.R. Coordinator

JL:lsc

UNION MEMORIAL HOSP

201 E UNIVERSITY PKY
BALTIMORE, MD 21218

Medicare Hospital Provider Number: 210024

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,469	11	10 - 14	3,577	10	10 - 14
Cancer	136	43	30 - 51	137	41	28 - 50
Cerebrovascular Accidents	153	26	18 - 34	161	20	20 - 35
Gastrointestinal Catastrophes	24	42	16 - 58	25	32	22 - 61
Infectious Disease	54	31	22 - 51	32	28	17 - 52
Metabolic/Electrolyte Disorders	47	9	10 - 35	51	24	10 - 40
Pulmonary Disease	154	27	17 - 34	154	25	17 - 35
Renal Failure	23	17	14 - 63	11	27	7 - 69
Severe Acute Heart Disease	158	30	32 - 49	175	31	33 - 50
Severe Chronic Heart Disease	217	21	17 - 30	190	19	16 - 29
Severe Trauma	8	13	11 - 65	9	22	6 - 64
Gastrointestinal Disease	191	2	1 - 7	223	2	1 - 6
Gynecologic Disease	34	0	0 - 99	19	0	0 -100
Low-Risk Heart Disease	367	2	2 - 5	382	3	2 - 6
Musculoskeletal/Skin Conditions	373	1	1 - 4	365	2	1 - 5
Neuropsychiatric/Sensory Disease	81	2	0 - 15	94	2	0 - 12
Urologic Disease	141	3	0 - 11	157	1	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	353
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	420
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	66
Registered Nurses:	380
Licensed Practical Nurses:	72

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

UNIVERSITY OF MARYLAND HOSPITAL

22 S GREENE ST
BALTIMORE, MD 21201

Medicare Hospital Provider Number: 210002

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,256	12	9 - 13	2,338	14	10 - 14
Cancer	113	27	30 - 51	143	33	33 - 54
Cerebrovascular Accidents	72	24	17 - 38	74	30	16 - 38
Gastrointestinal Catastrophes	24	42	18 - 59	32	31	15 - 51
Infectious Disease	25	44	13 - 53	26	38	21 - 60
Metabolic/Electrolyte Disorders	48	42	18 - 51	32	38	15 - 51
Pulmonary Disease	58	31	13 - 39	55	20	15 - 39
Renal Failure	21	14	6 - 57	20	30	6 - 62
Severe Acute Heart Disease	48	46	21 - 51	54	41	25 - 52
Severe Chronic Heart Disease	61	11	13 - 32	62	21	12 - 34
Severe Trauma	39	51	11 - 48	38	42	11 - 49
Gastrointestinal Disease	81	6	1 - 17	80	7	1 - 17
Gynecologic Disease	11	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	356	3	2 - 7	307	9	2 - 9
Musculoskeletal/Skin Conditions	197	9	0 - 16	212	12	1 - 13
Neuropsychiatric/Sensory Disease	200	2	1 - 7	217	0	1 - 5
Urologic Disease	66	3	0 - 35	56	4	0 - 40

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	610
Occupancy Rate (%):	86
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	706
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	293
Registered Nurses:	1,089
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

University of Maryland Medical System
University of Maryland Hospital

October 19, 1988

MEMORANDUM

TO: Health Care Financing Administration
Health Standards and Quality Bureau

FROM: Frank A. Appel
Director of Quality Management and
Medical Staff Affairs, UMMS

SUBJECT: **1987 Mortality Data Release**

Attached to this memorandum are comments from the University of Maryland Medical System (UMMS) for inclusion in the public release of hospital mortality data.

We would also like to bring two items to your attention:

1. The number of beds stated in the AHA 1986 profile for UMMS is incorrect. The correct number of beds is 735.
2. For two consecutive years, UMMS has not received the hospital-specific data when initially released. Both this year and last year, we had to call to request copies of the data. We request that you take appropriate steps to correct this for future releases.

FAA/mkp

University of Maryland Medical System
University of Maryland Hospital

Medicare Provider No. 210002

Comments on Mortality Data

The University of Maryland Medical System (UMMS) supports the efforts of the Health Care Financing Administration to provide comparative data on health care outcomes. Differences in outcomes, however, do not necessarily reflect differences in quality of care provided. Differences in mortality rates can result from differences in services provided by various hospitals or from differences in the severity of illnesses treated. The method used by HCFA to adjust mortality rates does not directly adjust for either of these factors. The University of Maryland Medical System is a regional referral center for many high-risk diseases, and as a result, higher mortality rates would be expected for many illnesses at UMMS when compared to the "average" hospital. This is specifically true for the category of severe trauma since UMMS houses the Shock Trauma Center, which is the hub of the state's emergency medical services system, and treats the most severe trauma cases in the region.

Data on mortality constitutes one of many sources of information used by the various peer review committees as part of our ongoing monitoring and evaluation of the quality of care provided at UMMS.

WASHINGTON ADVENTIST HOSP

7600 CARROLL AVE
TAKOMA PARK, MD 20912

Medicare Hospital Provider Number: 210016

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,016	11	10 - 14	1,910	11	10 - 15
Cancer	46	24	22 - 50	68	38	33 - 60
Cerebrovascular Accidents	77	25	17 - 38	50	16	18 - 41
Gastrointestinal Catastrophes	4	25	6 - 81	14	14	13 - 56
Infectious Disease	15	40	19 - 67	30	43	24 - 61
Metabolic/Electrolyte Disorders	56	23	16 - 44	29	10	9 - 39
Pulmonary Disease	88	27	19 - 41	87	30	19 - 41
Renal Failure	8	50	11 - 78	7	29	15 - 82
Severe Acute Heart Disease	73	40	26 - 51	89	33	29 - 50
Severe Chronic Heart Disease	93	16	16 - 32	68	13	15 - 34
Severe Trauma	2	0	1 - 91	1	100	1 - 97
Gastrointestinal Disease	81	1	1 - 10	101	2	1 - 9
Gynecologic Disease	9	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	520	3	2 - 6	454	4	2 - 6
Musculoskeletal/Skin Conditions	106	3	1 - 11	95	2	0 - 11
Neuropsychiatric/Sensory Disease	169	0	0 - 5	148	1	0 - 7
Urologic Disease	48	0	0 - 19	49	0	0 - 34

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	300
Occupancy Rate (%):	79
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	224
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	0
Registered Nurses:	390
Licensed Practical Nurses:	29

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WASHINGTON ADVENTIST HOSPITAL
7600 Carroll Avenue • Takoma Park Maryland 20912 Telephone (301) 891-7600

October 25, 1988

Ms. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Re: 1986/1987 Mortality Data
Medical Provider Number 210016

Dear Ms. Kappert:

The results of the 1986 and 1987 mortality data for Washington Adventist Hospital have been reviewed. The hospital falls well within the predicted rate of mortality for twelve of the diagnostic categories and below the expected mortality rate for two. No deaths occurred in the remaining two categories for the years surveyed.

The number of hospital beds documented as surveyed by the American Hospital Association in 1986 is erroneously listed as 202. Washington Adventist Hospital has had a bed capacity of 300 since 1985, and a higher bed count prior to that date.

Thank you for providing us the opportunity to submit our comments.

Sincerely,

Ronald D. Marx
President

RDM:pv

WASHINGTON COUNTY HOSP

KING ANTIETAM STS
HAGERSTOWN, MD 21740

Medicare Hospital Provider Number: 210001

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,042	14	10 - 15	2,934	12	10 - 15
Cancer	136	54	31 - 52	120	36	28 - 50
Cerebrovascular Accidents	123	26	18 - 35	115	24	19 - 36
Gastrointestinal Catastrophes	24	33	14 - 54	18	50	17 - 63
Infectious Disease	20	20	16 - 54	31	26	20 - 54
Metabolic/Electrolyte Disorders	46	35	7 - 41	49	16	9 - 37
Pulmonary Disease	179	22	16 - 33	143	22	15 - 32
Renal Failure	22	41	15 - 68	21	48	11 - 67
Severe Acute Heart Disease	166	34	30 - 48	180	38	31 - 48
Severe Chronic Heart Disease	184	28	16 - 31	162	21	16 - 31
Severe Trauma	7	43	5 - 72	6	17	10 - 73
Gastrointestinal Disease	202	4	1 - 9	208	3	1 - 7
Gynecologic Disease	27	0	0 -100	20	5	0 -100
Low-Risk Heart Disease	392	4	1 - 6	369	3	2 - 6
Musculoskeletal/Skin Conditions	313	3	1 - 6	255	3	1 - 7
Neuropsychiatric/Sensory Disease	92	4	0 - 20	97	3	1 - 12
Urologic Disease	132	2	0 - 8	135	4	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	273
Occupancy Rate (%):	75
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	124
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	0
Registered Nurses:	288
Licensed Practical Nurses:	34

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

WASHINGTON COUNTY HOSPITAL ASSOCIATION
CARING TOGETHER
251 East Antietam Street • Hagerstown, MD 21740-5771 • (301) 790-8000

October 21, 1988

Health Standards & Quality Bureau, Healthcare Financial Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207
Attention: Sandra Kappert

Dear Ms. Kappert:

The Washington County Hospital Association (WCHA) has received the HCFA Mortality Data for 1987. The statistical model developed by HCFA measures the relationship between diagnosis and the risk of death to the patient. By presenting expected norms and the previous year's figures, the information allows organizations to compare their performance from year to year, and compare their numbers against a standard range. WCHA is committed to the delivery of high quality patient treatment and appropriate consumption of resources. The HCFA data allows us to focus on limited areas to review the actual provision of care to assure our Board of Trustees and staff, as well as the public, that we are fulfilling our mission - the provision of the highest quality of medical care in the most appropriate fashion.

Washington County Hospital's mortality rates fall within the accepted range determined by HCFA, with the exception of the category of cancer. An extensive chart review of all Medicare patients treated at WCHA for cancer (both those who survived and died) revealed that those patients who died from cancer had certain factors in common:

(1) The ages fell into the "older range" of the elderly age group. Research supports the fact that the elderly are a high risk for complications for some diseases, such as cancer, because these patients tend to have additional physical problems, such as heart disease, lung disease, or diabetes that greatly inhibit their favorable response to major illness. A correlation exists as to the age of the patient and the predicted rate of survival from certain cancers.

(2) The severity of the disease process also increases the risk of mortality for individual patients. Some of the patients that were discharged home or to other facilities were discharged with a poor prognosis, because most of these patients were in the middle or late stage of their disease process. These patients were frequently suffering from a metastatic disease process or a malignancy such that they would only benefit from palliative as opposed to curative care. A correlation exists between the stage of the disease process on admission and the predicted rate of survival from certain cancers.

(3) The expected outcome of the admission was related to the individual's response to treatment. Reasons for admission ranged from diagnosis, chemotherapy, and treatment of other problems like intractable pain caused by the disease of cancer. A portion of the patients were newly diagnosed with a cancer that involved more than one body system, or the disease was too far advanced.

Although at this time we have not applied for Medicare certification as a Hospice WCHA, as a rural single community hospital, provides Hospice care to individuals requiring institutional support during the terminal stage of their illness. Endstage support was administered to many of the deceased cancer patients, some of whom were referred from out of our service area. When a community hospital offers this type of supportive care, then it follows that there will be more patient deaths in that hospital than in others who do not offer this service.

The review of quality of care and appropriate utilization of resources is the responsibility of every hospital. At WCHA, the Quality Assurance Program accomplishes this through a number of methods, only one of which is mortality review. An effective quality of care review can only be accomplished by a thorough review of each patient's medical record. This is done on a daily basis by a staff of trained nurse reviewers who use a set of "generic outcome screens" which identify potential problems with the medical care process. When a case "fails" the screen, this, in itself, does not identify unnecessary or inappropriate care - it only serves to signify that the particular case deserves further review and evaluation by the medical staff.

One result of the utilization review process is the agressive outpatient diagnosis and treatment regimen which reduces the total number of Medicare cancer admissions therefore the number of cancer deaths as a percentage increased.

The quality appropriateness process at the medical staff level reviews all aspects of the outcome and identifies any deficiencies that may have existed. Should a deficiency be identified, then an action plan is initiated, the emphasis of which is to improve clinical and technical performances which would then improve the quality of care. This process is ongoing and has been an integral part of the Quality Assurance Program at WCHA since 1980, and its findings are reported to the hospital's Board of Trustees every 90 days. The responsibility of the Board is to oversee the entire program. Not only is there internal oversight, but also external oversight by the Federal Government, the State of Maryland, and the Joint Commission on Accreditation of Healthcare Organizations.

This year, as last year, the mortality data has assisted WCHA in their Quality Assurance functions, and has provided a good source of information which has been used to perform more focused review in order to further measure the quality and appropriateness of care rendered to WCHA patients. The hospital is satisfied with the overall appearance of the data, with some minor exceptions as to the characteristics of the hospital:

1. We provide Hospice care under the Medicare Part A benefits not the Medicare Hospice benefits.
2. We have 317 beds.
3. Our daily occupancy rate for 1987 was 67%.
4. The total number of board certified specialists is 86.
5. The number of registered nurses per bed is 0.94.
6. The number of licensed practical nurses per bed is 0.14.
7. We do have a coronary care unit.

When handling such a large volume of data, there is increased risk of errors. However, we do hope that these characteristics will be corrected before the next release.

Thank you for this opportunity to respond to the data before public release.

Sincerely,
Beverly J David
Beverly J. David,
Quality Assurance Utilization
Review Coordinator

WYMAN PARK HEALTH SYSTEM

3100 WYMAN PARK DR
BALTIMORE, MD 21211

Medicare Hospital Provider Number: 210050

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	36	0	0 - 81	119	11	2 - 16
Cancer	0	-	-	2	0	3 - 88
Cerebrovascular Accidents	0	-	-	1	0	0 - 99
Gastrointestinal Catastrophes	0	-	-	1	0	1 - 97
Infectious Disease	0	-	-	1	0	0 -100
Metabolic/Electrolyte Disorders	0	-	-	1	0	0 - 99
Pulmonary Disease	0	-	-	2	100	3 - 88
Renal Failure	0	-	-	1	0	0 -100
Severe Acute Heart Disease	0	-	-	2	100	3 - 88
Severe Chronic Heart Disease	0	-	-	2	50	0 - 99
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	3	33	0 -100
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	0	-	-	19	5	0 - 88
Musculoskeletal/Skin Conditions	0	-	-	11	0	0 -100
Neuropsychiatric/Sensory Disease	36	0	0 - 81	31	3	0 - 96
Urologic Disease	0	-	-	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	110
Ownership/Control:	Federal Government

STAFFING

Interns and Residents:	14
Registered Nurses:	323
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

The
Homewood
Hospital Center

Homewood North

3100 Wyman Park Drive/Baltimore, MD 21211
(301) 338-3000

October 7, 1988

Ms. Sandra Kappert
Health Standards & Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

RE: Wyman Park Health System
Hospital ID: 210050

Dear Ms. Kappert:

During calender year 1987 The Wyman Park Health System operated no accute medical/surgical beds. All admissions were in the diagnostic category "Neuropsychiatric and Sensory Disease". There were 36 admissions and no deaths.

Sincerely,

Thomas E Schwark

Thomas E. Schwark, M.D.
Vice President for
Medical Affairs

TES/mel

JOHNS
HOPKINS
HEALTH
SYSTEM

ABINGTON MEM HOSP

1200 OLD YORK RD
ABINGTON, PA 19001

Medicare Hospital Provider Number: 390231

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,907	11	12 - 16	3,921	11	12 - 16
Cancer	180	36	33 - 53	147	38	32 - 53
Cerebrovascular Accidents	198	21	20 - 34	179	21	21 - 35
Gastrointestinal Catastrophes	32	25	16 - 50	30	13	24 - 55
Infectious Disease	56	25	22 - 49	59	22	23 - 50
Metabolic/Electrolyte Disorders	48	23	11 - 40	55	29	13 - 42
Pulmonary Disease	164	26	18 - 35	177	23	22 - 39
Renal Failure	25	36	18 - 70	26	38	16 - 69
Severe Acute Heart Disease	217	31	32 - 48	199	27	33 - 49
Severe Chronic Heart Disease	213	15	18 - 30	200	21	17 - 31
Severe Trauma	10	0	11 - 50	12	42	12 - 67
Gastrointestinal Disease	258	3	1 - 7	255	2	2 - 7
Gynecologic Disease	35	0	0 -100	40	0	0 -100
Low-Risk Heart Disease	411	1	2 - 5	399	2	3 - 6
Musculoskeletal/Skin Conditions	296	2	1 - 5	366	3	1 - 6
Neuropsychiatric/Sensory Disease	93	2	0 - 11	91	1	1 - 9
Urologic Disease	195	0	1 - 5	215	1	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	460
Occupancy Rate (%):	75
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	356
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	74
Registered Nurses:	576
Licensed Practical Nurses:	103

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ALBERT EINSTEIN MED CNTR

YORK & TABOR RDS
PHILADELPHIA, PA 19141

Medicare Hospital Provider Number: 390142

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,897	14	11 - 15	4,940	15	12 - 16
Cancer	193	36	32 - 51	192	38	33 - 52
Cerebrovascular Accidents	168	25	17 - 32	206	28	21 - 35
Gastrointestinal Catastrophes	67	46	27 - 56	49	39	22 - 54
Infectious Disease	79	59	28 - 54	74	57	30 - 58
Metabolic/Electrolyte Disorders	101	32	14 - 39	108	36	17 - 42
Pulmonary Disease	209	30	21 - 37	239	34	23 - 39
Renal Failure	46	15	8 - 54	76	21	12 - 58
Severe Acute Heart Disease	219	37	31 - 47	223	36	33 - 49
Severe Chronic Heart Disease	232	17	18 - 30	268	18	19 - 31
Severe Trauma	8	25	5 - 66	12	33	10 - 64
Gastrointestinal Disease	243	7	1 - 10	247	8	1 - 10
Gynecologic Disease	33	0	0 -100	26	0	0 - 24
Low-Risk Heart Disease	833	4	3 - 6	686	5	3 - 7
Musculoskeletal/Skin Conditions	348	3	1 - 6	359	4	1 - 7
Neuropsychiatric/Sensory Disease	85	9	1 - 19	120	2	1 - 8
Urologic Disease	231	0	1 - 5	221	2	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	705
Occupancy Rate (%):	83
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	859
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	181
Registered Nurses:	496
Licensed Practical Nurses:	139

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

ALBERT
EINSTEIN
HEALTHCARE
FOUNDATION

October 20, 1988 Provider 390142

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

The following comments have been prepared for inclusion with our hospital mortality data. We have a strong concern that this data will be misunderstood by the media and the public at large. We anticipate that those reviewing the data will consider these comments.

HCFA data applies only to Medicare patients and therefore is not representative of the entire patient population treated. In addition, critical factors such as the severity of illness upon admission, the admitting status (emergency, admission from nursing home) and the physiologic condition at the time of admission are not considered in the statistics. These factors will have an impact on the mortality rate and must be considered when reviewing the data.

Of specific concern is that the public will use the listing of hospital mortality rates to draw conclusions or make inferences about hospital quality. Mortality rates, by themselves, do not measure quality. The rates are best used by providers as quality screens to be used to signal investigation through chart reviews. As a result of those reviews appropriate conclusions can be made regarding quality.

HCFA's data indicates we are slightly outside of the predicted range in the diagnostic category of Infectious Disease. Focused review was immediately undertaken on each record by our quality assurance physicians and professionals. As a result of this intensified review, we determined that no quality of care issue exists. We did identify, however, that more specificity is needed in our coding and documentation within this category. We will be focusing intently on these issues in the future. Be aware that the specificity concern did not lead to any patient's death.

Albert Einstein Medical Center continues to be committed to providing all patients with the highest quality of care possible. Internal quality reviews are performed by physicians and other professionals for use in determining and maintaining our high standard. These internal reviews continue to indicate that quality care is being provided overall.

Our mission is to deliver high quality healthcare services. We believe in healthcare consumerism and that the public has a right to know valid information from which they can make an informed decision. We do not believe that the use of this particular mortality data will assist the public in reaching that decision.

Sincerely yours,

Robert B. Kimmel

Robert B. Kimmel
Vice President
Albert Einstein Healthcare Foundation

RBK/KK/dw/pob
0184B

ALIQUIPPA HOSPITAL

2500 HOSPITAL DRIVE
ALIQUIPPA, PA 15001

Medicare Hospital Provider Number: 390176

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,423	11	9 - 13	1,547	11	9 - 13
Cancer	42	50	24 - 56	48	58	29 - 60
Cerebrovascular Accidents	47	17	16 - 40	61	21	15 - 38
Gastrointestinal Catastrophes	6	0	8 - 60	12	33	10 - 62
Infectious Disease	19	47	16 - 61	11	27	10 - 62
Metabolic/Electrolyte Disorders	26	23	10 - 47	31	52	12 - 50
Pulmonary Disease	62	16	16 - 37	71	17	16 - 37
Renal Failure	15	33	18 - 75	7	0	15 - 71
Severe Acute Heart Disease	36	42	22 - 54	53	43	27 - 55
Severe Chronic Heart Disease	107	26	16 - 34	88	15	14 - 31
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	91	1	0 - 9	111	5	1 - 12
Gynecologic Disease	17	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	219	3	1 - 7	249	4	1 - 7
Musculoskeletal/Skin Conditions	101	3	1 - 11	129	0	1 - 5
Neuropsychiatric/Sensory Disease	25	0	0 - 55	53	2	0 - 19
Urologic Disease	137	1	0 - 16	120	2	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	175
Occupancy Rate (%):	50
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	84
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	127
Licensed Practical Nurses:	58

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ALIQUIPPA
HOSPITAL

2500 Hospital Drive
Aliquippa, Pennsylvania 15001
412/857-1212

October 20, 1988

Provider Number: 390176

William L. Roper, M.D., Administrator
Health Care Financing Administration
Department of Health & Human Services
Washington, D.C. 20201

Dear Dr. Roper:

Thank you for allowing us to provide input on the mortality statistics of 1987.

The data reported by HCFA has been reviewed by the Hospital administration, the President of the Medical Staff, Chairman of the Quality Assurance Committee, Chairman of the Utilization Review Committee and Director of Medical Records. We note that our mortality rate in every diagnostic category is within the ranges of predicted mortality rates.

However, some of the 1987 Hospital characteristics are inconsistent with the information Aliquippa Hospital submitted to the American Hospital Association:

- *Aliquippa Hospital does provide hospice care;
- *the number of physicians on our active and associate staff is 84;
- *the number 149 represents only the hospital's medical/surgical beds and ignores the 4 alcohol/chemical dependency beds, the 10 ICU-CCU beds and the 12 cardiac intensive care (PCU) beds.

Aliquippa Hospital agrees with the Health Care Financing Administration that the mortality rates are not a measurement of the quality of care rendered. We are an acute care facility that has been providing quality services to the community for more than three decades. Review of mortality cases is one component of the Quality Assurance monitoring program, conducted by members of the medical staff. The medical record of each patient who expires at this facility is carefully reviewed for appropriateness of care.

We will analyze your information in our continuing effort to improve care rendered to our patients. Again, thank you for the opportunity to present this response.

Sincerely,

Howard W. VanScoy, Jr.
President and Chief Executive Officer

Foster Hages, M.D.

Foster Hages, M.D., Chairman
Medical Care Appraisal and Medical Records

ALLEGHENY GENERAL HOSP

320 E NORTH AVE
PITTSBURGH, PA 15212

Medicare Hospital Provider Number: 390050

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,004	9	9 - 13	3,271	7	8 - 12
Cancer	236	31	33 - 52	213	24	33 - 51
Cerebrovascular Accidents	98	27	17 - 36	53	9	16 - 34
Gastrointestinal Catastrophes	24	29	20 - 60	13	31	15 - 65
Infectious Disease	17	29	22 - 66	5	20	11 - 78
Metabolic/Electrolyte Disorders	50	34	20 - 51	25	20	10 - 46
Pulmonary Disease	65	29	17 - 42	84	24	15 - 36
Renal Failure	27	15	9 - 57	13	15	12 - 68
Severe Acute Heart Disease	146	38	26 - 45	48	44	23 - 52
Severe Chronic Heart Disease	119	19	15 - 31	90	23	15 - 34
Severe Trauma	17	53	9 - 58	6	33	4 - 74
Gastrointestinal Disease	217	5	1 - 8	202	1	1 - 6
Gynecologic Disease	23	0	0 -100	29	0	0 -100
Low-Risk Heart Disease	935	2	2 - 5	571	2	2 - 5
Musculoskeletal/Skin Conditions	473	1	1 - 4	440	0	1 - 4
Neuropsychiatric/Sensory Disease	128	5	1 - 12	116	3	1 - 11
Urologic Disease	136	2	0 - 11	69	0	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 697
Occupancy Rate (%): 78
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 296
Percent of Physicians Who Are Board Certified Specialists: 86
Interns and Residents: 148
Registered Nurses: 988
Licensed Practical Nurses: 101

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: Yes
Hospice Care: No

ALLEGHENY VALLEY HOSP

1301 CARLISLE ST
NATRONA HEIGHTS, PA 15065

Medicare Hospital Provider Number: 390032

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,791	12	11 - 15	2,730	12	11 - 15
Cancer	108	50	30 - 54	101	39	29 - 52
Cerebrovascular Accidents	117	22	19 - 36	117	24	18 - 36
Gastrointestinal Catastrophes	21	29	13 - 55	13	31	17 - 66
Infectious Disease	51	37	23 - 53	41	24	21 - 52
Metabolic/Electrolyte Disorders	72	19	13 - 39	60	20	13 - 40
Pulmonary Disease	148	22	18 - 35	124	24	18 - 36
Renal Failure	12	25	20 - 78	6	67	17 - 87
Severe Acute Heart Disease	131	36	30 - 49	131	34	28 - 47
Severe Chronic Heart Disease	169	27	16 - 31	191	25	17 - 31
Severe Trauma	3	33	3 - 86	7	29	10 - 73
Gastrointestinal Disease	204	4	1 - 9	231	3	1 - 7
Gynecologic Disease	35	0	0 -100	27	0	0 -100
Low-Risk Heart Disease	356	2	2 - 6	353	2	2 - 6
Musculoskeletal/Skin Conditions	232	3	0 - 7	244	2	1 - 6
Neuropsychiatric/Sensory Disease	93	5	0 - 22	116	2	0 - 9
Urologic Disease	137	2	0 - 11	122	3	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	268
Occupancy Rate (%):	78
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	120
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	232
Licensed Practical Nurses:	23

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ALLENTOWN HOSPITAL

17TH CHEW STS
ALLENTOWN, PA 18102

Medicare Hospital Provider Number: 390133

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,839	13	12 - 16	2,033	16	13 - 17
Cancer	72	50	33 - 59	89	49	31 - 56
Cerebrovascular Accidents	81	22	17 - 37	84	21	18 - 38
Gastrointestinal Catastrophes	8	38	7 - 69	23	48	18 - 60
Infectious Disease	39	28	19 - 51	43	53	27 - 60
Metabolic/Electrolyte Disorders	22	5	7 - 37	24	13	9 - 42
Pulmonary Disease	79	24	16 - 37	74	23	16 - 38
Renal Failure	59	31	15 - 61	66	30	18 - 65
Severe Acute Heart Disease	68	43	28 - 53	95	41	30 - 51
Severe Chronic Heart Disease	104	23	15 - 33	110	35	16 - 35
Severe Trauma	1	0	0 - 99	2	0	1 - 89
Gastrointestinal Disease	113	4	2 - 11	127	2	1 - 9
Gynecologic Disease	51	0	0 -100	77	0	0 - 67
Low-Risk Heart Disease	163	6	3 - 11	185	5	2 - 9
Musculoskeletal/Skin Conditions	157	1	2 - 7	153	6	1 - 11
Neuropsychiatric/Sensory Disease	63	0	1 - 9	72	4	0 - 23
Urologic Disease	64	2	0 - 17	67	0	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	319
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	4
Registered Nurses:	431
Licensed Practical Nurses:	49

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ALLENTOWN OSTEO HOSP

1736 HAMILTON ST
ALLENTOWN, PA 18104

Medicare Hospital Provider Number: 390242

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,155	10	8 - 13	1,197	11	9 - 14
Cancer	28	43	24 - 62	36	44	23 - 57
Cerebrovascular Accidents	34	35	11 - 44	48	25	13 - 39
Gastrointestinal Catastrophes	12	42	17 - 70	11	55	9 - 65
Infectious Disease	10	40	9 - 66	10	60	17 - 73
Metabolic/Electrolyte Disorders	14	29	8 - 57	17	29	5 - 52
Pulmonary Disease	35	17	11 - 39	57	14	13 - 35
Renal Failure	2	50	2 - 92	8	0	16 - 70
Severe Acute Heart Disease	38	39	25 - 57	42	33	24 - 53
Severe Chronic Heart Disease	72	19	12 - 32	80	26	14 - 35
Severe Trauma	1	0	0 - 98	1	0	1 - 97
Gastrointestinal Disease	103	5	0 - 15	106	4	1 - 12
Gynecologic Disease	9	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	159	4	1 - 9	160	1	1 - 6
Musculoskeletal/Skin Conditions	99	3	0 - 12	99	1	1 - 8
Neuropsychiatric/Sensory Disease	37	0	0 - 49	43	5	0 - 50
Urologic Disease	72	3	0 - 26	41	2	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	150
Occupancy Rate (%):	63
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	132
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	12
Registered Nurses:	167
Licensed Practical Nurses:	27

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ALTOONA HOSP

HOWARD AVE 7TH ST
ALTOONA, PA 16603

Medicare Hospital Provider Number: 390073

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,919	12	11 - 15	3,146	12	10 - 15
Cancer	102	38	33 - 56	92	34	32 - 56
Cerebrovascular Accidents	116	22	18 - 34	138	28	22 - 39
Gastrointestinal Catastrophes	25	40	19 - 60	40	32	23 - 57
Infectious Disease	51	29	21 - 50	41	37	23 - 56
Metabolic/Electrolyte Disorders	59	27	16 - 45	43	30	10 - 43
Pulmonary Disease	109	22	17 - 36	98	18	16 - 35
Renal Failure	24	33	18 - 69	27	52	23 - 75
Severe Acute Heart Disease	165	33	29 - 47	143	38	29 - 48
Severe Chronic Heart Disease	181	27	17 - 32	151	25	16 - 32
Severe Trauma	9	22	11 - 67	11	55	7 - 64
Gastrointestinal Disease	222	2	1 - 7	264	4	1 - 7
Gynecologic Disease	48	0	0 -100	47	2	0 -100
Low-Risk Heart Disease	397	3	2 - 6	426	4	2 - 6
Musculoskeletal/Skin Conditions	274	4	1 - 7	289	1	1 - 5
Neuropsychiatric/Sensory Disease	103	2	0 - 10	116	3	0 - 12
Urologic Disease	123	2	0 - 11	150	0	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	310
Occupancy Rate (%):	70
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	120
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	18
Registered Nurses:	364
Licensed Practical Nurses:	56

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HOWARD AVENUE AND SEVENTH STREET
ALTOONA, PA 16603

814/946-2223

altoona hospital
CENTER FOR MEDICINE

ALBERT C. KNAUSS
PRESIDENT/CHIEF EXECUTIVE OFFICER

September 23, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

RE: Hospital ID: 390073

Dear Ms. Kappert:

A review of the Hospital Characteristics on the "Medicare Hospital Mortality Information" report and verification of the 1986 AHA Survey data revealed a discrepancy in the Hospital Characteristics as reported by HCFA.

Enclosed is a copy of the "Medicare Hospital Mortality Information" report and the 1986 AHA Survey for your easy reference and recalculation.

Areas in question include:

Beds

Occupancy Rate

Staffing:
  Percent of Physicians who are Board Certified Specialists
  Interns and Residents Per Bed
  Registered Nurses Per Bed
  Licensed Practical Nurses Per Bed

Specialty Services:
  Organ Transplant Service

A prompt response with the corrected data would be appreciated.

Sincerely,

Albert C. Knauss
President/Chief Executive Officer

sms
Enc.

AMERICAN ONCOLOGIC HOSPITAL

CENTRAL SHELMIRE AVES
PHILADELPHIA, PA 19111

Medicare Hospital Provider Number: 390196

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	411	23	19 - 28	403	25	24 - 34
Cancer	90	36	33 - 56	123	41	40 - 62
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	2	0	5 - 89	0	-	-
Infectious Disease	3	33	6 - 87	7	57	22 - 85
Metabolic/Electrolyte Disorders	4	75	16 - 89	11	55	24 - 78
Pulmonary Disease	23	48	23 - 63	9	56	23 - 81
Renal Failure	2	0	9 - 93	0	-	-
Severe Acute Heart Disease	2	100	10 - 94	3	67	9 - 90
Severe Chronic Heart Disease	3	100	4 - 79	4	50	6 - 82
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	9	22	0 - 80	4	0	0 -100
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	10	0	3 - 41	4	25	0 - 95
Musculoskeletal/Skin Conditions	15	20	2 - 52	15	27	1 - 56
Neuropsychiatric/Sensory Disease	5	40	2 - 78	2	0	0 -100
Urologic Disease	11	0	0 - 97	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	100
Occupancy Rate (%):	50
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	135
Percent of Physicians Who Are Board Certified Specialists:	87
Interns and Residents:	0
Registered Nurses:	157
Licensed Practical Nurses:	26

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ANDREW KAUL MEM HOSP

JOHNSONBURG RD
SAINT MARYS, PA 15857

Medicare Hospital Provider Number: 390154

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	709	12	9 - 15	787	11	10 - 15
Cancer	9	78	28 - 81	23	48	29 - 69
Cerebrovascular Accidents	33	30	14 - 46	37	35	14 - 46
Gastrointestinal Catastrophes	5	0	4 - 64	12	50	14 - 68
Infectious Disease	11	45	16 - 71	9	33	15 - 72
Metabolic/Electrolyte Disorders	12	8	10 - 52	9	11	3 - 58
Pulmonary Disease	42	24	10 - 38	34	15	10 - 38
Renal Failure	4	50	11 - 89	2	50	6 - 95
Severe Acute Heart Disease	34	24	25 - 55	44	20	26 - 52
Severe Chronic Heart Disease	42	21	12 - 39	53	23	13 - 37
Severe Trauma	2	50	2 - 92	0	-	-
Gastrointestinal Disease	78	3	1 - 13	73	0	1 - 8
Gynecologic Disease	12	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	66	5	1 - 15	94	2	1 - 10
Musculoskeletal/Skin Conditions	59	3	0 - 17	70	4	0 - 17
Neuropsychiatric/Sensory Disease	17	0	0 - 73	20	0	0 - 77
Urologic Disease	32	3	0 - 41	32	0	0 - 29

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	233
Occupancy Rate (%):	77
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	27
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	0
Registered Nurses:	52
Licensed Practical Nurses:	31

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ANDREW
KAUL
MEMORIAL
HOSPITAL

Office of the Administrator

Johnsonburg Road
St. Marys, Pennsylvania 15857
(814) 781-7500

Because We Care

October 18, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Provider # 390154

Dear Mrs. Kappert:

Andrew Kaul Memorial has received and reviewed the mortality data relative to our Medicare patients for the 1987 calendar year. As requested we would like to identify the following discrepancies found during the verification process:

1. Patient [redacted] in category Other Diseases was reported in the HCFA Data as Date of Discharge [redacted] while our records show the last Date of Discharge as [redacted]

2. Patients [redacted] and [redacted] were reported in the HCFA Data as Dates of Discharge [redacted] and [redacted] respectively while our records show the last Dates of Discharge to be [redacted] and [redacted] respectively.

3. HCFA Data reported number of cases for all causes for calendar year 1986 as 787 while our records show the number to be 778.

4. HCFA Data for the section "Hospital Characteristics" contains the following Discrepancies:

	HCFA	AKMH #390154
Beds	63	63 Med/Surgical
Occupancy	74%	11,815 Medicare Days
Ownership	Private	Public
Board Certified	23%	14 of 31
R.N.'s/Bed	.90	53 F.T.+ 8 P.T. for 99 bed
L.P.N.'s/Bed	.37	18 F.T.+ 9 P.T. for 99 bed

The remaining HCFA Data appears to be correct and self explanatory requiring no additional comments. Any questions relative to the discrepancies, please call y office at (814) 834-8550.

Sincerely,

G J Berasi

G. J. Berasi
Administrator

GJB/pm

ARMSTRONG COUNTY MEMORIAL HOSPITAL

RD 8, BOX 50
KITTANNING, PA 16201

Medicare Hospital Provider Number: 390163

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,088	12	10 - 14	2,087	13	10 - 14
Cancer	61	41	28 - 56	76	51	33 - 59
Cerebrovascular Accidents	60	27	18 - 42	72	21	18 - 39
Gastrointestinal Catastrophes	17	29	16 - 61	5	40	7 - 79
Infectious Disease	30	43	17 - 55	20	35	20 - 62
Metabolic/Electrolyte Disorders	24	8	12 - 42	21	5	7 - 37
Pulmonary Disease	105	19	15 - 33	110	23	20 - 39
Renal Failure	9	44	10 - 75	9	56	20 - 86
Severe Acute Heart Disease	82	50	27 - 50	61	39	27 - 53
Severe Chronic Heart Disease	149	25	17 - 33	137	26	17 - 33
Severe Trauma	2	0	2 - 88	3	33	2 - 86
Gastrointestinal Disease	125	4	1 - 11	138	5	1 - 11
Gynecologic Disease	17	0	0 -100	19	0	0 -100
Low-Risk Heart Disease	262	2	2 - 7	278	2	2 - 6
Musculoskeletal/Skin Conditions	202	2	1 - 7	217	2	1 - 7
Neuropsychiatric/Sensory Disease	81	0	1 - 8	58	9	1 - 24
Urologic Disease	123	3	0 - 14	132	5	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	200
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	68
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	186
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ASHLAND STATE GENERAL HOSP

ROUTE 61
ASHLAND, PA 17921

Medicare Hospital Provider Number: 390181

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,118	12	9 - 14	1,219	14	10 - 16
Cancer	19	42	15 - 59	34	56	25 - 60
Cerebrovascular Accidents	35	29	18 - 49	44	30	17 - 45
Gastrointestinal Catastrophes	6	33	4 - 73	8	38	8 - 70
Infectious Disease	16	25	11 - 56	12	50	16 - 69
Metabolic/Electrolyte Disorders	16	13	9 - 49	20	25	8 - 50
Pulmonary Disease	97	23	15 - 35	111	22	17 - 35
Renal Failure	11	36	18 - 79	9	33	11 - 75
Severe Acute Heart Disease	55	40	26 - 53	51	41	27 - 55
Severe Chronic Heart Disease	81	26	12 - 33	93	23	16 - 35
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	105	6	1 - 14	121	2	1 - 8
Gynecologic Disease	6	0	0 -100	15	7	0 - 80
Low-Risk Heart Disease	199	3	1 - 7	194	5	1 - 9
Musculoskeletal/Skin Conditions	89	6	0 - 18	97	3	0 - 15
Neuropsychiatric/Sensory Disease	9	11	0 - 96	10	10	0 - 96
Urologic Disease	74	3	0 - 18	62	3	1 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	161
Occupancy Rate (%):	50
Ownership/Control:	State Government

STAFFING

Total Number of Physicians:	58
Percent of Physicians Who Are Board Certified Specialists:	47
Interns and Residents:	0
Registered Nurses:	89
Licensed Practical Nurses:	31

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BARNES KASSON COUNTY HOSP

400 TURNPIKE ST
SUSQUEHANNA, PA 18847

Medicare Hospital Provider Number: 390224

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	368	8	9 - 16	398	7	7 - 14
Cancer	3	33	11 - 92	2	0	4 - 89
Cerebrovascular Accidents	23	35	16 - 54	10	0	15 - 49
Gastrointestinal Catastrophes	5	20	14 - 81	3	67	5 - 87
Infectious Disease	2	0	1 - 92	5	80	8 - 76
Metabolic/Electrolyte Disorders	7	43	9 - 73	1	0	1 - 97
Pulmonary Disease	29	14	11 - 39	29	21	9 - 41
Renal Failure	2	0	11 - 97	3	67	5 - 88
Severe Acute Heart Disease	9	44	16 - 74	10	50	16 - 72
Severe Chronic Heart Disease	23	26	9 - 46	26	8	15 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	33	0	0 - 22	34	0	0 - 25
Gynecologic Disease	2	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	61	2	1 - 12	75	1	1 - 10
Musculoskeletal/Skin Conditions	43	2	0 - 21	49	0	0 - 14
Neuropsychiatric/Sensory Disease	7	0	0 -100	15	0	0 - 80
Urologic Disease	12	0	0 - 89	10	10	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	96
Occupancy Rate (%):	80
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	14
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BERWICK HOSP

701 EAST 16TH ST
BERWICK, PA 18603

Medicare Hospital Provider Number: 390072

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,141	8	9 - 13	1,232	10	9 - 14
Cancer	16	56	22 - 68	18	78	30 - 70
Cerebrovascular Accidents	54	26	16 - 41	58	19	18 - 40
Gastrointestinal Catastrophes	5	40	7 - 79	3	100	13 - 85
Infectious Disease	11	18	17 - 65	8	50	13 - 74
Metabolic/Electrolyte Disorders	22	0	11 - 36	7	0	3 - 55
Pulmonary Disease	50	12	16 - 37	51	25	14 - 40
Renal Failure	5	80	17 - 88	4	50	7 - 86
Severe Acute Heart Disease	48	29	25 - 52	49	37	25 - 53
Severe Chronic Heart Disease	72	14	16 - 33	82	16	16 - 34
Severe Trauma	1	0	0 - 98	1	0	0 - 99
Gastrointestinal Disease	113	1	1 - 7	119	3	1 - 11
Gynecologic Disease	3	0	0 -100	11	0	0 - 92
Low-Risk Heart Disease	162	5	1 - 10	164	3	1 - 8
Musculoskeletal/Skin Conditions	96	2	1 - 10	116	0	1 - 6
Neuropsychiatric/Sensory Disease	35	3	0 - 35	52	2	0 - 17
Urologic Disease	53	0	0 - 19	43	2	0 - 36

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	299
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	35
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	0
Registered Nurses:	66
Licensed Practical Nurses:	23

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BLOOMSBURG HOSP

549 E FAIR ST
BLOOMSBURG, PA 17815

Medicare Hospital Provider Number: 390003

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,007	15	9 - 15	1,033	15	10 - 16
Cancer	17	41	14 - 60	18	67	21 - 64
Cerebrovascular Accidents	39	38	14 - 45	46	41	17 - 46
Gastrointestinal Catastrophes	6	33	5 - 74	4	50	6 - 83
Infectious Disease	15	47	13 - 62	22	32	24 - 64
Metabolic/Electrolyte Disorders	12	8	10 - 52	11	36	5 - 62
Pulmonary Disease	81	32	17 - 40	84	39	15 - 38
Renal Failure	7	100	19 - 74	9	78	18 - 80
Severe Acute Heart Disease	43	35	25 - 54	47	45	26 - 55
Severe Chronic Heart Disease	59	34	12 - 37	43	35	12 - 41
Severe Trauma	1	100	2 - 97	0	-	-
Gastrointestinal Disease	70	11	0 - 25	65	2	0 - 13
Gynecologic Disease	8	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	115	5	1 - 12	132	2	1 - 8
Musculoskeletal/Skin Conditions	80	4	1 - 14	67	1	0 - 18
Neuropsychiatric/Sensory Disease	32	9	0 - 86	23	0	0 - 75
Urologic Disease	53	0	0 - 15	42	0	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	125
Occupancy Rate (%):	42
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	41
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	90
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BRADDOCK GENERAL HOSPITAL

400 HOLLAND AVE
BRADDOCK, PA 15104

Medicare Hospital Provider Number: 390128

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,881	12	11 - 15	1,902	12	11 - 16
Cancer	50	38	27 - 56	57	49	28 - 57
Cerebrovascular Accidents	88	28	17 - 37	73	25	19 - 40
Gastrointestinal Catastrophes	17	29	13 - 58	14	21	15 - 61
Infectious Disease	32	19	20 - 51	39	28	23 - 56
Metabolic/Electrolyte Disorders	31	32	16 - 52	30	20	15 - 48
Pulmonary Disease	82	22	21 - 41	105	29	18 - 39
Renal Failure	7	71	17 - 84	9	56	19 - 84
Severe Acute Heart Disease	109	36	28 - 48	111	32	29 - 48
Severe Chronic Heart Disease	114	16	16 - 31	138	20	16 - 31
Severe Trauma	1	0	0 - 98	1	0	1 - 97
Gastrointestinal Disease	143	0	2 - 5	125	2	1 - 9
Gynecologic Disease	5	0	0 -100	6	17	0 -100
Low-Risk Heart Disease	276	3	2 - 7	286	2	2 - 6
Musculoskeletal/Skin Conditions	159	2	1 - 7	158	4	1 - 9
Neuropsychiatric/Sensory Disease	48	2	0 - 21	50	2	0 - 17
Urologic Disease	78	0	0 - 8	78	1	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 207
Occupancy Rate (%): 82
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 83
Percent of Physicians Who Are Board Certified Specialists: 70
Interns and Residents: 0
Registered Nurses: 170
Licensed Practical Nurses: 24

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

BRADDOCK GENERAL HOSPITAL
400 HOLLAND AVENUE
BRADDOCK, PENNSYLVANIA 15104
MAIN NUMBER (412) 636-5000

October 21, 1988

William Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

We have received for review and comment our mortality statistics for Medicare patients treated in 1987 which are scheduled to be published in December, 1988 by the Health Care Financing Administration.

We were pleased to note that our actual mortality rates were well within the range of the predicted mortality rates for our institution in all diagnostic categories. However, we feel that the use of mortality statistics alone, especially when the sample is small, is of limited value in assessing the quality of care that has been provided.

As a community hospital, we continually strive to provide high quality health care to the patients we serve.

We thank you for the opportunity to comment.

Sincerely,

Rand J. Wortman
President

RJW/dsd

BRADFORD HOSPITAL

116-156 INTERSTATE PARKWAY
BRADFORD, PA 16701

Medicare Hospital Provider Number: 390118

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	895	11	9 - 15	1,046	11	8 - 13
Cancer	14	64	26 - 74	17	47	25 - 71
Cerebrovascular Accidents	44	23	14 - 40	33	18	15 - 43
Gastrointestinal Catastrophes	2	0	1 - 89	11	64	15 - 69
Infectious Disease	9	33	12 - 69	21	19	19 - 57
Metabolic/Electrolyte Disorders	19	32	11 - 55	25	8	6 - 37
Pulmonary Disease	29	24	12 - 45	44	14	12 - 35
Renal Failure	2	0	1 - 91	0	-	-
Severe Acute Heart Disease	36	50	27 - 60	34	44	22 - 55
Severe Chronic Heart Disease	50	22	14 - 38	42	19	12 - 37
Severe Trauma	1	0	0 -100	1	100	0 - 98
Gastrointestinal Disease	76	0	3 - 9	81	1	1 - 9
Gynecologic Disease	5	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	136	4	2 - 10	160	5	1 - 10
Musculoskeletal/Skin Conditions	89	1	1 - 9	120	2	2 - 9
Neuropsychiatric/Sensory Disease	26	12	0 - 71	29	0	0 - 44
Urologic Disease	54	2	0 - 16	45	7	0 - 46

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	224
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	36
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	76
Licensed Practical Nurses:	28

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BRADFORD
HOSPITAL

116-156 Interstate Parkway • Bradford, Pennsylvania • 16701 • (814) 368-4143

RE: MEDICARE PROVIDER NUMBER
39-0118

October 12, 1988

Mr. William Roper
Health Care Financing Administration
Department of Health and Human Services
Washington, D.C. 20201

RE: Medicare Provider #39-0118

Dear Mr. Roper:

Enclosed for your information is Bradford Hospital's response to the plans for the publication of selected mortality information for Medicare patients treated in 1987.

The summary reflects our review and interpretive comments regarding our data for Medicare patients treated in 1987.

Sincerely,

Michael G. Guley
President/C.E.O.

MGG:AB:tln

enclosure

The Bradford Hospital mortality rate did not have any significant deviations from the HCFA predicted mortality rate. The overall mortality rate for both years remained at 11%. It is important to note that the comparison from last year's mortality data to this year's data shows a relatively stable relationship between actual and predicted rates. In all diagnostic categories, the hospital's actual mortality rate fell well within the predicted range, and usually at the lower end of this range.

It is important to remember that "predicted" rates are nothing more than averages. Most of the differences amongst hospital's mortality rates that are "predicted" are the result of differences in the mix of patients across the 16 diagnostic categories.

Finally, the differences between actual and predicted mortality rates are not an indicator of quality of care differences. Rather, the differences are because of the kinds of patients treated and the differences of the treatment provided due to patient characteristics.

Bradford Hospital plays an integral role in meeting the medical needs of its community. The hospital serves as a primary care center for the nursing home residents in the Bradford area. The hospital has specialty services like the coronary care unit and a hospice care service through the Visiting Nurses Association.

Bradford Hospital provides medical care to patients that are both chronically ill with degenerative conditions, as well as patients who are associated with a high risk of morbidity.

BRANDYWINE HOSPITAL

201 REESEVILLE ROAD
CALN, PA 19320

Medicare Hospital Provider Number: 390076

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,453	12	11 - 15	1,522	12	12 - 16
Cancer	35	46	28 - 62	38	45	30 - 64
Cerebrovascular Accidents	68	25	19 - 41	49	31	16 - 42
Gastrointestinal Catastrophes	9	56	15 - 74	16	50	19 - 67
Infectious Disease	12	58	16 - 69	23	48	18 - 60
Metabolic/Electrolyte Disorders	25	20	10 - 46	36	19	14 - 45
Pulmonary Disease	108	21	16 - 34	95	18	20 - 39
Renal Failure	10	40	17 - 80	9	22	10 - 73
Severe Acute Heart Disease	62	40	28 - 54	65	46	30 - 55
Severe Chronic Heart Disease	114	22	17 - 33	113	22	19 - 36
Severe Trauma	3	33	5 - 87	1	100	3 - 99
Gastrointestinal Disease	114	2	1 - 8	93	2	1 - 10
Gynecologic Disease	6	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	224	4	1 - 7	233	1	3 - 7
Musculoskeletal/Skin Conditions	120	2	1 - 9	122	2	1 - 8
Neuropsychiatric/Sensory Disease	43	2	0 - 40	44	7	0 - 70
Urologic Disease	43	0	0 - 30	51	2	0 - 31

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	188
Occupancy Rate (%):	77
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	139
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	189
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BROOKVILLE HOSPITAL

SOUTH MAIN STREET
BROOKVILLE, PA 15825

Medicare Hospital Provider Number: 390191

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	788	12	9 - 14	851	13	9 - 15
Cancer	8	50	15 - 76	17	35	22 - 67
Cerebrovascular Accidents	27	33	13 - 49	26	38	16 - 53
Gastrointestinal Catastrophes	4	0	16 - 79	3	33	5 - 87
Infectious Disease	11	0	16 - 50	9	22	11 - 66
Metabolic/Electrolyte Disorders	21	14	9 - 46	24	38	10 - 51
Pulmonary Disease	44	36	19 - 49	48	21	15 - 40
Renal Failure	0	-	-	1	100	3 -100
Severe Acute Heart Disease	34	44	21 - 54	34	47	24 - 58
Severe Chronic Heart Disease	40	27	13 - 41	31	39	15 - 49
Severe Trauma	0	-	-	3	0	2 - 81
Gastrointestinal Disease	58	3	1 - 17	74	3	2 - 12
Gynecologic Disease	6	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	110	2	1 - 8	136	6	1 - 11
Musculoskeletal/Skin Conditions	46	0	2 - 11	51	0	0 - 12
Neuropsychiatric/Sensory Disease	55	0	0 - 14	53	2	0 - 27
Urologic Disease	45	0	0 - 16	29	0	0 - 53

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	73
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	18
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	72
Licensed Practical Nurses:	45

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

BROWNSVILLE GENERAL HOSP

125 SIMPSON RD
BROWNSVILLE, PA 15417

Medicare Hospital Provider Number: 390166

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	863	13	12 - 17	947	11	10 - 16
Cancer	25	44	27 - 66	18	56	25 - 70
Cerebrovascular Accidents	36	19	15 - 42	31	23	15 - 45
Gastrointestinal Catastrophes	11	55	10 - 66	5	20	7 - 76
Infectious Disease	19	26	19 - 60	20	15	21 - 57
Metabolic/Electrolyte Disorders	16	31	10 - 57	14	36	11 - 61
Pulmonary Disease	61	26	14 - 39	75	23	18 - 40
Renal Failure	6	50	19 - 91	4	75	15 - 92
Severe Acute Heart Disease	50	38	25 - 54	46	33	25 - 53
Severe Chronic Heart Disease	39	13	16 - 39	55	22	13 - 36
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	61	5	1 - 19	78	1	1 - 10
Gynecologic Disease	3	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	166	4	2 - 9	202	2	2 - 7
Musculoskeletal/Skin Conditions	78	3	0 - 15	92	0	1 - 6
Neuropsychiatric/Sensory Disease	14	7	0 - 68	12	0	0 - 63
Urologic Disease	37	3	0 - 27	34	0	1 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	95
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	37
Percent of Physicians Who Are Board Certified Specialists:	51
Interns and Residents:	0
Registered Nurses:	61
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BRYN MAWR HOSP

BRYN MAWR AVE
BRYN MAWR, PA 19010

Medicare Hospital Provider Number: 390139

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,802	10	10 - 14	3,812	11	10 - 14
Cancer	139	42	29 - 50	167	37	33 - 53
Cerebrovascular Accidents	152	23	20 - 36	126	25	20 - 37
Gastrointestinal Catastrophes	30	17	22 - 54	40	38	21 - 55
Infectious Disease	79	29	23 - 49	53	43	24 - 55
Metabolic/Electrolyte Disorders	47	15	14 - 41	38	11	8 - 36
Pulmonary Disease	147	21	19 - 36	160	26	19 - 37
Renal Failure	21	19	16 - 66	23	35	17 - 71
Severe Acute Heart Disease	162	31	31 - 48	156	31	30 - 48
Severe Chronic Heart Disease	170	18	17 - 31	183	21	17 - 31
Severe Trauma	8	13	11 - 65	11	45	9 - 66
Gastrointestinal Disease	263	3	2 - 7	270	5	2 - 8
Gynecologic Disease	36	6	0 - 99	37	0	0 -100
Low-Risk Heart Disease	565	2	2 - 6	507	4	2 - 6
Musculoskeletal/Skin Conditions	408	3	1 - 5	405	1	1 - 4
Neuropsychiatric/Sensory Disease	97	1	0 - 9	102	4	0 - 17
Urologic Disease	187	1	0 - 7	159	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	361
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	459
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	40
Registered Nurses:	588
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

BUCTAIL MEDICAL CTR
PINE STREET
RENOVO, PA 17764

Medicare Hospital Provider Number: 390244

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	109	9	8 - 20	148	7	8 - 18
Cancer	0	-	-	3	67	9 - 90
Cerebrovascular Accidents	4	0	4 - 70	3	33	2 - 87
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	1	0	1 - 97
Metabolic/Electrolyte Disorders	1	0	0 -100	3	0	3 - 79
Pulmonary Disease	8	13	13 - 64	14	7	10 - 45
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	4	100	16 - 79	7	14	18 - 73
Severe Chronic Heart Disease	9	0	9 - 46	4	75	4 - 80
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	8	0	0 -100	5	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	21	0	0 - 31	31	3	0 - 31
Musculoskeletal/Skin Conditions	4	0	0 -100	10	0	0 - 97
Neuropsychiatric/Sensory Disease	2	0	0 -100	2	0	0 -100
Urologic Disease	1	0	0 -100	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	50
Occupancy Rate (%):	78
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	3
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	5
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BUTLER MEMORIAL HOSP

911 EAST BRADY ST
BUTLER, PA 16001

Medicare Hospital Provider Number: 390168

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,988	12	10 - 14	2,401	11	9 - 13
Cancer	50	44	27 - 57	79	52	28 - 54
Cerebrovascular Accidents	72	33	16 - 39	95	25	18 - 37
Gastrointestinal Catastrophes	16	25	17 - 62	16	13	13 - 52
Infectious Disease	18	39	19 - 64	16	25	19 - 63
Metabolic/Electrolyte Disorders	31	19	11 - 44	30	10	11 - 40
Pulmonary Disease	96	26	17 - 37	116	23	16 - 35
Renal Failure	9	22	13 - 74	7	57	11 - 80
Severe Acute Heart Disease	98	46	28 - 49	88	34	25 - 47
Severe Chronic Heart Disease	156	22	16 - 31	133	22	16 - 32
Severe Trauma	0	-	-	2	50	2 - 92
Gastrointestinal Disease	165	3	1 - 8	198	1	1 - 6
Gynecologic Disease	44	0	0 -100	41	0	0 -100
Low-Risk Heart Disease	261	3	1 - 7	324	7	1 - 8
Musculoskeletal/Skin Conditions	165	3	1 - 8	205	1	1 - 5
Neuropsychiatric/Sensory Disease	51	4	0 - 30	84	4	0 - 21
Urologic Disease	90	0	0 - 8	126	2	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 303
Occupancy Rate (%): 66
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 122
Percent of Physicians Who Are Board Certified Specialists: 74
Interns and Residents: 0
Registered Nurses: 219
Licensed Practical Nurses: 30

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

CANONSBURG GENERAL HOSPITAL

RD 1 BOX 147 ROUTE 519
CANONSBURG, PA 15317

Medicare Hospital Provider Number: 390160

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,302	12	11 - 16	1,274	12	11 - 16
Cancer	36	36	26 - 59	32	63	33 - 68
Cerebrovascular Accidents	43	19	15 - 40	34	26	15 - 46
Gastrointestinal Catastrophes	5	100	17 - 73	4	25	9 - 83
Infectious Disease	23	35	19 - 59	32	41	30 - 66
Metabolic/Electrolyte Disorders	36	25	14 - 47	30	23	10 - 45
Pulmonary Disease	96	23	19 - 39	120	27	17 - 36
Renal Failure	8	38	10 - 76	7	43	8 - 78
Severe Acute Heart Disease	35	37	26 - 59	38	50	26 - 58
Severe Chronic Heart Disease	63	21	15 - 36	55	18	15 - 37
Severe Trauma	0	-	-	1	0	0 - 97
Gastrointestinal Disease	111	4	2 - 11	113	1	1 - 7
Gynecologic Disease	8	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	143	2	1 - 8	140	6	1 - 11
Musculoskeletal/Skin Conditions	175	3	1 - 8	159	3	1 - 8
Neuropsychiatric/Sensory Disease	34	0	0 - 20	24	0	0 - 42
Urologic Disease	35	6	0 - 77	21	0	0 - 91

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	120
Occupancy Rate (%):	98
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	75
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	112
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CANONSBURG GENERAL HOSPITAL
R.D.1 Box 147 Route 519
Canonsburg, Pennsylvania 15317

412-745-6100

October 6, 1988

Mrs. Sandra Kappert
Health Standards & Quality Bureau, HCFA
2-0-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Medicare Provider #39-0160

Dear Mrs. Kappert:

Thank you for permitting Canonsburg General Hospital the opportunity to review and comment on the HCFA mortality data prior to its public release.

We at Canonsburg General Hospital continue to have concern that consumers of healthcare may not understand, or may misunderstand, the meaning of the data contained in this report. As an example, the course of treatment for five patients suffering from G.I. catastrophes were reviewed thoroughly for appropriateness and effectiveness of care. These in-depth case reviews revealed nothing lacking in the quality of care provided at Canonsburg General Hospital, but did, unfortunately reveal five patients whose stages of illness were quite advanced. The quality of the care provided to those patients by Canonsburg General Hospital was determined to be appropriate and necessary. Despite this, the overriding factor of their advanced medical condition prevailed over all efforts of our physicians and hospital staff.

Lastly, I would like to correct an item contained in the "Hospital Characteristics" section of your report. Canonsburg General Hospital has no organ transplant service.

Sincerely,

Gary L. Perecko
President and Chief Executive Officer

CARBONDALE GEN HOSP

185 FALLBROOK ST
CARBONDALE, PA 18407

Medicare Hospital Provider Number: 390092

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	373	14	9 - 16	430	13	8 - 16
Cancer	8	63	15 - 75	9	67	20 - 76
Cerebrovascular Accidents	12	50	7 - 61	15	33	10 - 56
Gastrointestinal Catastrophes	3	0	10 - 83	2	0	0 - 92
Infectious Disease	12	50	12 - 66	7	43	9 - 74
Metabolic/Electrolyte Disorders	7	29	4 - 69	12	17	8 - 55
Pulmonary Disease	33	30	14 - 46	34	15	13 - 40
Renal Failure	0	-	-	3	100	13 - 88
Severe Acute Heart Disease	13	23	19 - 64	19	37	21 - 63
Severe Chronic Heart Disease	18	28	6 - 49	20	40	7 - 50
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	36	0	1 - 14	35	0	0 - 21
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	56	2	0 - 16	59	3	1 - 17
Musculoskeletal/Skin Conditions	32	3	0 - 53	49	8	0 - 44
Neuropsychiatric/Sensory Disease	13	8	0 -100	12	0	0 -100
Urologic Disease	17	0	0 - 93	18	6	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	63
Occupancy Rate (%):	39
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	47
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	0
Registered Nurses:	39
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CARLISLE HOSP

246 PARKER ST
CARLISLE, PA 17013

Medicare Hospital Provider Number: 390058

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,454	13	10 - 15	1,567	13	10 - 15
Cancer	41	41	25 - 57	51	41	25 - 55
Cerebrovascular Accidents	74	31	14 - 37	84	26	18 - 38
Gastrointestinal Catastrophes	10	70	15 - 69	20	50	18 - 63
Infectious Disease	24	25	17 - 54	25	36	17 - 56
Metabolic/Electrolyte Disorders	33	33	10 - 47	21	29	8 - 50
Pulmonary Disease	65	25	16 - 39	66	23	14 - 37
Renal Failure	6	17	10 - 77	12	58	12 - 74
Severe Acute Heart Disease	81	33	26 - 49	104	32	25 - 45
Severe Chronic Heart Disease	102	20	13 - 30	83	22	14 - 33
Severe Trauma	3	0	7 - 81	2	50	1 - 93
Gastrointestinal Disease	86	1	1 - 9	102	4	0 - 13
Gynecologic Disease	20	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	115	3	1 - 10	127	2	1 - 8
Musculoskeletal/Skin Conditions	129	1	1 - 7	140	4	0 - 10
Neuropsychiatric/Sensory Disease	42	7	0 - 38	53	2	0 - 19
Urologic Disease	70	3	0 - 22	73	3	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	231
Occupancy Rate (%):	46
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	84
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	156
Licensed Practical Nurses:	76

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Carlisle Hospital
246 Parker Street
P.O. Box 310
Carlisle, Pennsylvania 17013-0310

1-800-346-4789 • (717) 249-1212

October 21,1988

Health Standards and Quality Bureau
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Senate Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Carlisle Hospital has received and validated the 1988 Mortality data released by HCFA September, 1988. The following discrepancies were noted:

[redacted]

All cases in the category of gastrointestinal catastrophe, which had an actual mortality rate of 70%, predicted range being 15-69, were evaluated by a Board Certified gastroenterologist and the patients had a severity of illness for which mortality was not an unexpected outcome. In all cases no quality issues were identified.

Sincerely,

Kim Balbach

Kim Balbach
Vice President for Administration

KB/rm

CARON HOSPITAL

BOX 277 GALEN HALL ROAD
WERNERSVILLE , PA 19565

Medicare Hospital Provider Number: 390275

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	13	0	0 -100	22	0	0 - 49
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	0	-	-
Musculoskeletal/Skin Conditions	0	-	-	0	-	-
Neuropsychiatric/Sensory Disease	13	0	0 -100	21	0	0 - 53
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	20
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	9
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THE CARON
FOUNDATION

Formerly Chit Chat Foundation
CARON HOSPITAL
Galen Hall Road, Box A, Wernersville, PA 19565
Telephone: (215) 678-2332

October 7, 1988

Medicare Provider #390275

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

I reviewed the information in regard to patient-specific data. The information is correct. However, there are five patients that were not on your list. I am submitting their patient numbers and ages and dates of treatment on the attached list, but will not be identifying patients by name due to the confidentiality laws.

My association with the representatives of Keystone Peer Review Organization has always been positive. The reviewers have been both professional and helpful in answering questions concerning requirements necessary to justify the patients' admission and continued stays. There have been two on-site reviews and several off-site reviews, all of which I found the representatives helpful when changes were required to meet KEPRO's guidelines. When denial of admissions did occur, our Medical Director had the opportunity to refer the cases to a physician reviewer of KEPRO, giving him an explanation of our detoxification program which includes assessment of physical and mental status of the patient. After thorough examination of the cases, the denials were negated and admissions were deemed justifiable to the KEPRO physician reviewer.

I trust this information is helpful and what you are looking for.

Sincerely,

Janet L Heist

Janet L. Heist, Executive Director
Caron Hospital

CENTRAL MEDICAL CENTER HOSPITAL

1200 CENTRE AVE
PITTSBURGH, PA 15219

Medicare Hospital Provider Number: 390262

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,237	6	6 - 10	1,073	6	6 - 11
Cancer	29	41	22 - 58	20	35	21 - 63
Cerebrovascular Accidents	20	30	9 - 50	14	43	12 - 61
Gastrointestinal Catastrophes	5	20	11 - 78	6	33	7 - 74
Infectious Disease	2	50	2 - 92	6	0	23 - 74
Metabolic/Electrolyte Disorders	12	17	9 - 56	29	21	9 - 43
Pulmonary Disease	19	26	8 - 49	27	15	11 - 41
Renal Failure	2	0	6 - 91	1	0	0 - 97
Severe Acute Heart Disease	28	50	19 - 56	21	29	18 - 56
Severe Chronic Heart Disease	37	14	12 - 36	41	22	11 - 38
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	47	4	0 - 27	45	2	0 - 25
Gynecologic Disease	5	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	365	2	2 - 6	233	4	1 - 7
Musculoskeletal/Skin Conditions	94	1	0 - 10	104	0	1 - 6
Neuropsychiatric/Sensory Disease	219	0	1 - 5	210	0	1 - 5
Urologic Disease	37	3	0 - 58	33	3	0 - 54

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 133
Occupancy Rate (%): 57
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 121
Percent of Physicians Who Are Board Certified Specialists: 79
Interns and Residents: 4
Registered Nurses: 123
Licensed Practical Nurses: 42

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

CENTRAL MEDICAL CENTER & HOSPITAL
1200 Centre Avenue, Pittsburgh, PA 15219

(412) 562-3000

CENTRAL MEDICAL CENTER AND HOSPITAL
COMMENTS ON 1987 HCFA MORTALITY DATA

The mortality data submitted by the Health Care Financing Administration indicates that a total of 78 Medicare patients admitted to Central Medical Center and Hospital died within 30 days of admission. Of these, 69 died while still a patient in the hospital while 9 died after discharge. Of the 9 patients who died after discharge, we have been able to verify 6 deaths through the attending physicians. Of the 9 post discharge deaths the median age was 74, three were discharged to hospice care for terminal cancer and the remaining 6 were discharged only after plans for supportive care and services were complete and each patient had achieved his or her maximum health potential. Of these 6 all had chronic major organ and/or system disease.

Statistically our mortalities are all within the range predicted for each individual major diagnostic category. However, the present statistical methods of comparing mortality in (and outside of) hospitals is an adjunct to our medical review of all deaths that occur in our institution.

CENTRE COMMUNITY HOSP

1800 E PARK AVE
STATE COLLEGE, PA 16803

Medicare Hospital Provider Number: 390268

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,660	12	11 - 16	1,674	14	11 - 16
Cancer	74	50	31 - 58	83	54	30 - 55
Cerebrovascular Accidents	60	25	18 - 42	69	25	16 - 38
Gastrointestinal Catastrophes	9	22	9 - 65	8	50	8 - 71
Infectious Disease	15	47	15 - 64	16	44	15 - 63
Metabolic/Electrolyte Disorders	25	24	5 - 45	18	17	10 - 49
Pulmonary Disease	77	19	16 - 37	85	28	13 - 35
Renal Failure	9	56	5 - 72	9	11	19 - 77
Severe Acute Heart Disease	93	39	28 - 50	94	38	28 - 50
Severe Chronic Heart Disease	112	25	15 - 33	127	24	17 - 34
Severe Trauma	3	0	4 - 79	0	-	-
Gastrointestinal Disease	100	5	1 - 13	109	6	0 - 15
Gynecologic Disease	18	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	219	1	2 - 6	201	3	2 - 7
Musculoskeletal/Skin Conditions	130	2	1 - 8	143	1	1 - 7
Neuropsychiatric/Sensory Disease	44	2	1 - 19	40	2	0 - 42
Urologic Disease	67	1	0 - 50	55	2	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	200
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	119
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	0
Registered Nurses:	149
Licensed Practical Nurses:	60

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

October 7, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, MD 21207

Dear Ms. Kappert: I.D. #390268

Mortality Information:

As closely as we can determine, HCFA's mortality cases concur with our abstracted records.

Although our actual "rate" falls on the low side of our predicted range, many of the ICD-9-CM codes used reflect conditions resulting from other chronic diseases. Frequently patients will be diagnosed and initially treated in a tertiary care setting and then return to their community hospital for terminal, end-stage care, therefore, increasing those smaller hospitals' mortality rates.

Hospital Characteristics:

We are unsure how these figures were derived, there are a number of inconsistencies with our 1986 AHA data. Enclosed, please find partial copies of our 1986 and 1987 AHA surveys for reference.

We have 200 beds in service. With exception (perhaps) of pediatric and obstetrical beds (although we have had several Medicare OB patients) we still would have 170 beds which could be utilized by Medicare patients. One cannot accurately determine an occupancy rate based on 126 adult general medical/surgical beds.

Staffing:

Total number of physicians is correct at 113, but 86 of them are board certified, therefore, 76% not 55% of them have this credential.

RNs per bed-should be 1.02/bed if considering both full and part-time staff for 200 beds.

LPNs per bed-should be 0.46/bed if considering both full and part-time staff for 200 beds.

Specialty Services:

We do have a coronary care unit but do not have an organ transplant service.

Thank you for your attention.

Sincerely,

Anne N Stecher

Anne N. Stecher, DRG Coordinator

ANS/dmb

Enclosures

CHAMBERSBURG HOSPITAL

112 N 7 ST PO BOX 187
CHAMBERSBURG, PA 17201

Medicare Hospital Provider Number: 390151

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,982	12	10 - 14	1,954	13	10 - 14
Cancer	72	58	28 - 54	75	60	31 - 56
Cerebrovascular Accidents	86	26	17 - 37	75	25	16 - 37
Gastrointestinal Catastrophes	19	32	14 - 57	24	33	17 - 57
Infectious Disease	14	36	13 - 62	18	33	14 - 59
Metabolic/Electrolyte Disorders	40	20	18 - 48	27	22	9 - 45
Pulmonary Disease	113	20	18 - 36	97	29	15 - 36
Renal Failure	6	83	17 - 83	1	100	2 -100
Severe Acute Heart Disease	89	36	26 - 48	104	43	29 - 50
Severe Chronic Heart Disease	88	22	13 - 31	68	29	14 - 37
Severe Trauma	2	100	1 - 90	2	0	1 - 92
Gastrointestinal Disease	165	4	1 - 9	172	2	1 - 7
Gynecologic Disease	16	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	247	3	2 - 7	275	3	2 - 6
Musculoskeletal/Skin Conditions	198	1	1 - 5	204	2	0 - 7
Neuropsychiatric/Sensory Disease	35	0	0 - 24	29	0	0 - 36
Urologic Disease	86	0	0 - 23	98	1	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	217
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	89
Percent of Physicians Who Are Board Certified Specialists:	85
Interns and Residents:	0
Registered Nurses:	176
Licensed Practical Nurses:	101

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

CHARLES COLE MEMORIAL HOSP

RD 3
COUDERSPORT, PA 16915

Medicare Hospital Provider Number: 390246

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	863	11	8 - 14	820	10	8 - 14
Cancer	14	64	28 - 76	14	43	21 - 70
Cerebrovascular Accidents	31	26	10 - 42	39	23	17 - 44
Gastrointestinal Catastrophes	7	43	12 - 77	1	0	2 - 97
Infectious Disease	9	56	14 - 73	8	63	10 - 71
Metabolic/Electrolyte Disorders	18	17	9 - 49	13	23	7 - 56
Pulmonary Disease	57	19	14 - 37	48	13	17 - 39
Renal Failure	0	-	-	2	50	4 - 93
Severe Acute Heart Disease	28	43	23 - 60	18	44	22 - 65
Severe Chronic Heart Disease	37	30	11 - 41	42	26	14 - 41
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	75	4	1 - 14	62	5	1 - 18
Gynecologic Disease	8	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	85	1	1 - 9	93	4	1 - 13
Musculoskeletal/Skin Conditions	120	1	1 - 7	105	1	1 - 8
Neuropsychiatric/Sensory Disease	34	6	0 - 73	27	0	0 - 56
Urologic Disease	55	2	0 - 41	46	2	0 - 83

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 135
Occupancy Rate (%): 67
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 19
Percent of Physicians Who Are Board Certified Specialists: 32
Interns and Residents: 0
Registered Nurses: 56
Licensed Practical Nurses: 22

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

CHESTER CO HOSP

701 EAST MARSHALL ST
WEST CHESTER, PA 19380

Medicare Hospital Provider Number: 390179

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,943	11	11 - 15	1,983	12	11 - 15
Cancer	58	36	25 - 53	77	43	26 - 52
Cerebrovascular Accidents	77	19	20 - 39	61	28	18 - 42
Gastrointestinal Catastrophes	14	43	12 - 62	28	32	14 - 52
Infectious Disease	43	30	24 - 55	42	38	21 - 54
Metabolic/Electrolyte Disorders	33	9	13 - 41	45	16	13 - 41
Pulmonary Disease	92	17	16 - 35	95	25	17 - 38
Renal Failure	5	80	8 - 80	10	40	22 - 85
Severe Acute Heart Disease	106	39	30 - 51	91	45	28 - 50
Severe Chronic Heart Disease	145	18	18 - 32	122	27	17 - 34
Severe Trauma	5	20	7 - 75	3	0	6 - 80
Gastrointestinal Disease	131	2	1 - 8	135	0	1 - 5
Gynecologic Disease	18	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	240	3	2 - 7	238	0	2 - 5
Musculoskeletal/Skin Conditions	138	2	1 - 8	147	1	1 - 6
Neuropsychiatric/Sensory Disease	45	0	0 - 15	53	4	0 - 30
Urologic Disease	54	0	0 - 26	50	0	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	251
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	164
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	295
Licensed Practical Nurses:	51

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SERVING CHESTER COUNTY SINCE 1892

RICHARD M. ARMSTRONG, JR., CHAIRMAN
H. L. PERRY PEPPER, PRESIDENT
MRS. RICHARD E. HECKERT, SECRETARY

TELEPHONE 215-431-5000

THE CHESTER COUNTY HOSPITAL • WEST CHESTER, PENNSYLVANIA
19380

October 21, 1988

Statistical Department
Health Care Finance Administration
6325 Security Boulevard
Baltimore, MD 21207

RE: Hospital Characteristics Information
The Chester County Hospital
Hospital ID: #390179

Gentlemen:

We have recently received and reviewed the Hospital Characteristics Information that you have listed for our Hospital and find them to be incorrect in several areas.

The first inconsistency deals with the number of beds. In the survey year 1986 we reported to the A.H.A. 251 beds, not 183 as is currently shown on the report.

The second inconsistency deals with the percent of physicians who are board certified specialists. In survey year 1986 we reported to the A.H.A. that 65% of our physicians were board certified, not 50% as is currently shown on the report.

We would appreciate your making these changes and include the corrected information in your December publication.

Sincerely,

Richard P. Stabler/JH

Richard P. Stabler
Administrative Assistant

CHESTNUT HILL HOSP

8835 GERMANTOWN AVE
PHILADELPHIA, PA 19118

Medicare Hospital Provider Number: 390026

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,156	12	10 - 14	2,044	13	11 - 15
Cancer	73	36	26 - 52	71	38	25 - 51
Cerebrovascular Accidents	105	29	17 - 36	95	32	17 - 37
Gastrointestinal Catastrophes	22	32	16 - 57	21	33	18 - 61
Infectious Disease	25	44	16 - 56	29	41	20 - 58
Metabolic/Electrolyte Disorders	36	28	14 - 48	36	17	11 - 42
Pulmonary Disease	129	24	18 - 36	99	28	19 - 40
Renal Failure	11	27	12 - 72	13	38	15 - 75
Severe Acute Heart Disease	87	36	29 - 51	114	39	31 - 51
Severe Chronic Heart Disease	92	20	14 - 32	67	18	14 - 34
Severe Trauma	4	25	2 - 81	7	43	9 - 74
Gastrointestinal Disease	128	4	1 - 10	140	4	1 - 9
Gynecologic Disease	15	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	213	4	1 - 8	197	2	2 - 7
Musculoskeletal/Skin Conditions	228	3	1 - 7	206	1	1 - 6
Neuropsychiatric/Sensory Disease	73	4	0 - 22	55	0	1 - 10
Urologic Disease	103	0	0 - 9	88	1	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	200
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	167
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	20
Registered Nurses:	254
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

CITIZENS GENERAL HOSP

651 FOURTH AVE
NEW KENSINGTON, PA 15068

Medicare Hospital Provider Number: 390018

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,956	12	10 - 15	2,231	13	10 - 15
Cancer	64	33	26 - 53	79	42	28 - 54
Cerebrovascular Accidents	100	24	17 - 35	85	20	18 - 37
Gastrointestinal Catastrophes	15	20	19 - 63	20	40	16 - 60
Infectious Disease	25	16	16 - 49	34	47	21 - 57
Metabolic/Electrolyte Disorders	32	38	15 - 52	43	33	11 - 44
Pulmonary Disease	78	24	14 - 36	62	23	14 - 38
Renal Failure	12	33	11 - 71	10	20	14 - 74
Severe Acute Heart Disease	104	39	28 - 49	136	37	30 - 49
Severe Chronic Heart Disease	132	23	15 - 31	145	26	16 - 33
Severe Trauma	2	0	1 - 92	3	33	1 - 88
Gastrointestinal Disease	127	4	1 - 10	164	4	1 - 9
Gynecologic Disease	22	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	209	4	1 - 8	281	4	1 - 7
Musculoskeletal/Skin Conditions	150	2	1 - 8	174	4	1 - 9
Neuropsychiatric/Sensory Disease	56	4	0 - 30	63	2	0 - 18
Urologic Disease	103	1	0 - 10	106	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	214
Occupancy Rate (%):	57
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	90
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	0
Registered Nurses:	177
Licensed Practical Nurses:	23

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Citizens General Hospital
651 Fourth Avenue
New Kensington, Pennsylvania 15068-6591
(412) 337-3541

Provider No.390018

Comments on Medicare Hospital Mortality Information (1987)

Citizens General Hospital is a private, non-profit, acute care facility currently licensed for 232 beds. Acute care is defined as care requiring twenty-four-hour-a-day observation and treatment by a physician and/or nurse. Patients no longer requiring acute care are evaluated for the need of continued care after discharge. Our Social Service Department and/or Home Care Coordinator make arrangements for those patients found to need continued care.

Data Verification

The data used by the Health Care Financing Administration (HCFA) includes 1,956 Medicare discharges from Citizens General Hospital in 1987. Because this includes only the last stay in our hospital for each of our 1987 Medicare patients, this number is difficult for us to verify. Many Medicare patients have multiple admissions during the course of a year, and our internal data includes all of them. Of the 1,956 cases identified in the HCFA data, 241 or 12% of those patients died within 30 days of admission. Two dates of death were found to be incorrect as listed. These corrections have been provided to HCFA.

In addition to the 1987 Medicare Hospital Mortality Information for Citizens General Hospital, we also understand that HCFA intends to publish a set of hospital characteristics obtained from our 1987 American Hospital Association (AHA) survey. This is a survey that all hospitals are requested to complete on an annual basis by the American Hospital Association. The 1987 AHA survey was completed by our hospital in November, 1987, and was applicable to our fiscal year beginning July 1, 1986, and ending June 30, 1987. HCFA will obtain the information from the survey we completed directly from the AHA. Although we have been told what items from that survey HCFA plans to publish, the actual information that they plan to publish has not been provided to us for verification. Because of that, to assure that the published information matches what we provided on our 1987 AHA Survey, the following is the information that apparently will be published taken directly from our copy of our 1987 AHA Survey:

# beds (set up and staffed):	214
Ownership/Control	Private, non-profit

Staffing

Total number of physicians:	90
Total number of Board certified physicians:	71
Number of registered nurses (RNs):	123 full time/108 part time
Number of nurse practitioners:	0
Number of licensed practical nurses (LPNs):	17 full time/13 part time

Specialty Services

12 bed mixed medical/surgical intensive care/coronary care unit.
No shock/trauma unit, burn unit, organ transplant service or hospice care unit.

Interpretation of data

Citizens General Hospital's actual mortality rate was within the HCFA range of predicted mortality rates for Citizens General Hospital in all 16 diagnostic categories listed and for the total number of Medicare cases. Further review indicates that:

158 patients or 66% of the deaths occurred in "high risk" categories, i.e., cancer, cerebrovascular accident (stroke), renal failure, etc.

19 patients or 8% of the deaths occurred in "low-risk" categories (i.e., gastrointestinal disease, low-risk heart disease, urologic disease, etc.). The ages of patients that expired in these categories averaged 77-80 years of age. Five patients or 27% of these patients died sometime after they were discharged from the hospital.

64 patients or 27% of the deaths occurred in patients not categorized into one of the 16 diagnostic categories. Diagnoses included respiratory arrest, respiratory failure, acute bronchitis, gastrointestinal bleeding, and uncontrolled diabetic mellitus.

44 patients or 18% of the deaths occurred after the patient was discharged from the hospital (cause of death unknown).

The following should also be taken into consideration when interpreting this data:

1. The goal of Citizens General Hospital is to always provide quality care according to the patient's needs and based on widely accepted standards of practice (expected care for a patient with a given problem).
2. Mortality rates do not provide a measure for the quality of care provided in hospitals. Each patient's hospital stay must be evaluated to determine if appropriate quality of care was provided.

   Such an evaluation of appropriate care takes into consideration:
   1. Age of the patient.
   2. The severity of the patient's illness.
   3. Diagnosis or diagnoses
   4. Whether or not the patient or family accepts all of the care that is offered.

   Quality of care is routinely evaluated and monitored in this manner by physician- supported committees at Citizens General Hospital. Review of the medical record of every patient who dies is an important part of this ongoing process.
3. Mortality rates should be measured over an extended period of time. The longer the period of time considered (and, thus, the more cases included) the more valid the actual mortality rates become.
4. HCFA assigned patients to a diagnostic category based on the reason for which they were admitted to the hospital. That diagnosis is not always, however, the cause of death. For instance, a patient who has had heart disease for a long time could be admitted to the hospital for an emergency appendectomy, but suddenly die because of the heart disease. Similarly, the diagnosis for which a patient was last admitted to the hospital may very well not be the cause of death of the patient after he/she was discharged from the hospital. A patient may have been discharged after suffering a heart attack and later be struck and killed by an automobile. The cause of death for those patients who died in the hospital could only be determined by individual chart review. The cause of death for those who died after discharge from the hospital could not be determined since this information is not in the patients' hospital charts.
5. Comorbid conditions (diagnoses that patients experience along with the reason for admission and which complicate management or treatment) are often the cause of death. A review of patients expiring in "low-risk" and in "high-risk" groups were noted to have one or more comorbid conditions including cancer, renal failure, pulmonary disease, diabetes and cerebrovascular degeneration.
6. This mortality report includes only Medicare patients. Medicare patients accounted for approximately 46% of the discharges from Citizens General Hospital in 1987.

CLARION OSTEOPATHIC COMM HOSP

ONE HOSPITAL DRIVE
CLARION, PA 16214

Medicare Hospital Provider Number: 390093

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	651	16	10 - 17	695	12	11 - 17
Cancer	15	40	24 - 72	12	33	19 - 70
Cerebrovascular Accidents	25	36	17 - 54	22	23	15 - 50
Gastrointestinal Catastrophes	4	50	4 - 82	6	33	8 - 75
Infectious Disease	18	44	18 - 63	20	25	18 - 58
Metabolic/Electrolyte Disorders	4	75	5 - 80	10	30	6 - 63
Pulmonary Disease	33	12	12 - 38	50	12	13 - 35
Renal Failure	6	17	16 - 82	5	100	27 - 91
Severe Acute Heart Disease	39	59	24 - 56	48	38	28 - 56
Severe Chronic Heart Disease	36	28	11 - 41	38	26	12 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	54	4	0 - 19	48	2	1 - 17
Gynecologic Disease	2	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	108	4	1 - 11	129	4	1 - 10
Musculoskeletal/Skin Conditions	64	2	1 - 12	55	0	1 - 10
Neuropsychiatric/Sensory Disease	8	0	0 -100	12	8	0 - 86
Urologic Disease	8	0	0 -100	11	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	93
Occupancy Rate (%):	58
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	28
Percent of Physicians Who Are Board Certified Specialists:	46
Interns and Residents:	4
Registered Nurses:	60
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Clarion Osteopathic Community Hospital **COCH**

ONE HOSPITAL DRIVE, CLARION, PA. 16214 — 814-226-9500

October 24, 1988

Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

RE: HCFA Mortality Report
Severe Acute Heart Disease

Dear Ms. Kappert:

Upon reviewing the Medicare Hospital Mortality Information 1987, we found two discrepancies we would like to comment about.

> One case was transferred to another acute care hospital after a four day length of stay and died at that facility following a three day length of stay.
>
> One case died in our Emergency Room and technically should never have been admitted.

With the first case removed from our statistics, it will change our actual mortality statistics to 56%, the predicted range being 24 to 56%. The second case is a problem within our own facility.

On the staffing statistics in 1986, our hospital did have interns.

Thank you for the opportunity to respond to this survey.

Sincerely,

Charles Staeheli

Charles Staeheli, Jr.
Acting Administrator

kmh

CLEARFIELD HOSP

809 TURNPIKE AVE
CLEARFIELD, PA 16830

Medicare Hospital Provider Number: 390052

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,220	13	9 - 14	1,260	14	10 - 16
Cancer	20	55	29 - 72	23	61	35 - 75
Cerebrovascular Accidents	31	23	16 - 46	48	33	16 - 44
Gastrointestinal Catastrophes	10	60	12 - 69	13	8	15 - 54
Infectious Disease	15	27	12 - 58	17	35	18 - 63
Metabolic/Electrolyte Disorders	27	30	10 - 48	29	24	12 - 48
Pulmonary Disease	74	34	19 - 43	93	25	17 - 38
Renal Failure	7	43	11 - 79	2	50	3 - 93
Severe Acute Heart Disease	33	58	20 - 54	56	38	27 - 53
Severe Chronic Heart Disease	70	29	14 - 37	80	31	16 - 38
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	95	3	1 - 11	108	4	1 - 11
Gynecologic Disease	19	0	0 -100	25	0	0 -100
Low-Risk Heart Disease	213	1	2 - 6	183	4	1 - 8
Musculoskeletal/Skin Conditions	120	2	1 - 9	125	1	1 - 7
Neuropsychiatric/Sensory Disease	25	4	0 - 74	16	6	0 - 98
Urologic Disease	35	3	0 - 66	30	3	1 - 23

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	135
Occupancy Rate (%):	59
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	34
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	132
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COALDALE STATE GNRL HOSP

7TH STREET
COALDALE, PA 18218

Medicare Hospital Provider Number: 390183

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	846	12	9 - 14	895	14	9 - 14
Cancer	16	56	19 - 65	19	58	26 - 70
Cerebrovascular Accidents	35	31	14 - 45	42	36	14 - 44
Gastrointestinal Catastrophes	5	60	7 - 79	3	0	10 - 83
Infectious Disease	8	38	7 - 69	5	60	10 - 81
Metabolic/Electrolyte Disorders	11	27	9 - 62	13	62	9 - 61
Pulmonary Disease	46	20	13 - 39	51	33	12 - 40
Renal Failure	3	33	5 - 88	2	50	2 - 93
Severe Acute Heart Disease	40	32	25 - 55	41	46	25 - 56
Severe Chronic Heart Disease	54	31	11 - 37	57	30	11 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	61	2	1 - 12	62	0	1 - 9
Gynecologic Disease	9	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	154	3	1 - 8	145	3	2 - 8
Musculoskeletal/Skin Conditions	71	3	1 - 14	75	3	0 - 15
Neuropsychiatric/Sensory Disease	33	0	0 - 25	46	7	0 - 48
Urologic Disease	27	7	0 - 96	35	0	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	162
Occupancy Rate (%):	(not available)
Ownership/Control:	State Government

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

COLUMBIA HOSP

7TH POPLAR STS
COLUMBIA, PA 17512

Medicare Hospital Provider Number: 390200

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	392	13	6 - 14	456	14	8 - 15
Cancer	8	63	10 - 71	11	18	15 - 63
Cerebrovascular Accidents	6	67	5 - 73	14	43	9 - 58
Gastrointestinal Catastrophes	1	0	3 - 98	3	67	2 - 86
Infectious Disease	6	17	6 - 69	4	50	5 - 82
Metabolic/Electrolyte Disorders	9	11	3 - 57	9	44	2 - 69
Pulmonary Disease	16	13	8 - 46	21	24	11 - 49
Renal Failure	0	-	-	4	100	13 - 81
Severe Acute Heart Disease	17	24	16 - 57	15	53	20 - 67
Severe Chronic Heart Disease	24	29	8 - 45	30	40	9 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	42	2	0 - 35	56	7	0 - 35
Gynecologic Disease	2	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	55	9	0 - 32	59	2	1 - 12
Musculoskeletal/Skin Conditions	35	0	0 - 23	35	3	0 - 26
Neuropsychiatric/Sensory Disease	13	0	0 -100	17	0	0 - 88
Urologic Disease	17	6	0 - 98	14	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	76
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	24
Percent of Physicians Who Are Board Certified Specialists:	42
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COLUMBIA HOSPITAL
Founded 1895

Provider Number: 390200

October 17, 1988

Health Standards and Quality Bureau, HCFA
ATTN: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

To Whom It May Concern:

Persuant to our review of specific diagnostic categories in the HCFA mortality information report, we submit the following comments:

(1). We could not verify nor substantiate the number of "cases" and the "actual mortality rate" that was reported.

(2). Diagnostic Category; Cancer:
Our records indicate the three (3) of the mortalities in this category were terminal cancer cases admitted to the hospital during the final stages of their illness. The Average Length of Stay was 3.6 days.

(3). Diagnostic Category; Cerebrovascular Accidents:
The three (3) mortalities in this category had a mean age of 71 and a median age of 69. The Average Length of Stay for these three (3) cases was 14 days.

(4). Diagnostic Category; Pulmonary Disease:
The two (2) mortalities in this category had a mean age 71 and a median age of 71. The Average Length of Stay for these two (2) cases was 1 day.

(5). Diagnostic Category; Severe Acute Heart Disease:
The four (4) mortalities in this category had a mean age of 74 and a median age of 75. The Average Length of Stay for these four (4) cases was 4 days.

(6). Diagnostic Category; Severe Chronic Heart Disease:
The four (4) mortalities in this category had a mean age of 79 and a median age of 79. The Average Length of Stay for these four (4) cases was 7 days.

(7). Diagnostic Category; Infectious Disease:

The one (1) mortality in this category was 82 years old with an Average Length of Stay of 10 days. This patient expired within 30 days after being discharged from the hospital.

COMMUNITY GENERAL HOSP

145 N 6TH ST
READING, PA 19601

Medicare Hospital Provider Number: 390096

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,412	12	9 - 14	1,414	12	9 - 14
Cancer	53	42	25 - 54	54	37	28 - 57
Cerebrovascular Accidents	62	29	15 - 38	65	25	17 - 40
Gastrointestinal Catastrophes	16	44	18 - 66	8	63	12 - 73
Infectious Disease	18	56	15 - 61	10	50	8 - 66
Metabolic/Electrolyte Disorders	15	7	9 - 46	11	18	6 - 57
Pulmonary Disease	55	16	12 - 34	51	14	13 - 36
Renal Failure	4	50	12 - 90	6	33	15 - 85
Severe Acute Heart Disease	43	40	27 - 57	48	54	29 - 58
Severe Chronic Heart Disease	88	14	14 - 30	96	26	14 - 33
Severe Trauma	2	0	1 - 89	2	50	1 - 94
Gastrointestinal Disease	102	5	1 - 13	124	6	0 - 13
Gynecologic Disease	9	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	162	3	1 - 8	143	3	1 - 8
Musculoskeletal/Skin Conditions	145	3	1 - 9	196	4	1 - 9
Neuropsychiatric/Sensory Disease	25	0	0 - 62	33	3	0 - 41
Urologic Disease	75	1	0 - 14	38	0	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	146
Occupancy Rate (%):	62
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	141
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	123
Licensed Practical Nurses:	60

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMMUNITY GENERAL OSTEOPATHIC HOSPIT

4300 LONDONDERRY RD
HARRISBURG, PA 17109

Medicare Hospital Provider Number: 390206

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,314	11	9 - 13	1,402	13	9 - 14
Cancer	43	42	21 - 52	50	38	25 - 55
Cerebrovascular Accidents	59	25	15 - 38	49	49	15 - 43
Gastrointestinal Catastrophes	7	43	7 - 72	8	50	10 - 72
Infectious Disease	22	45	20 - 62	25	44	22 - 62
Metabolic/Electrolyte Disorders	25	28	11 - 50	25	24	14 - 52
Pulmonary Disease	70	24	15 - 38	53	21	11 - 36
Renal Failure	6	33	6 - 78	4	50	10 - 89
Severe Acute Heart Disease	35	31	21 - 53	52	42	26 - 54
Severe Chronic Heart Disease	81	19	14 - 33	94	21	13 - 32
Severe Trauma	2	50	1 - 94	2	50	4 - 92
Gastrointestinal Disease	86	0	1 - 7	96	1	1 - 8
Gynecologic Disease	21	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	129	4	1 - 10	131	3	1 - 9
Musculoskeletal/Skin Conditions	204	2	1 - 7	220	1	1 - 5
Neuropsychiatric/Sensory Disease	20	10	0 -100	30	3	0 - 91
Urologic Disease	78	1	0 - 25	65	3	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	157
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	114
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	25
Registered Nurses:	131
Licensed Practical Nurses:	31

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Community General
Osteopathic Hospital

October 20, 1988

William L. Roper, M. D.
Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington, D.C. 20201

RE: For Publication with Public Release of 1987 HCFA Mortality Data.

Dear Dr. Roper:

Kindly include the following comments with the scheduled public release of 1987 Medicare mortality data.

We note that HCFA plans to release selected characteristics of hospitals taken from the 1986 and 1987 AHA Surveys. We strenuously urge HCFA to publish such data as submitted by individual hospitals without further manipulation. It is our understanding that HCFA has agreed, as of October 12, 1988, to publish 1986 and 1987 AHA Survey characteristics as collected by AHA. We note errors in such data as reprinted by HCFA in number of beds (actual 157, reported by HCFA as 135) and, specialty services (CGOH reported mixed ICU/CCU, HCFA interpreted as no Coronary Care). By separate attachment, we provide corrections of incorrect patient data as submitted to us by HCFA.

We urge HCFA to caution all recipients of these data that the statistics as presented cannot be used to infer quality of care, and we trust that you will advise readers that hospitals cannot readily be ranked by a cursory review of such figures. We hope you will acknowledge that without, for example, inclusion of uniform severity-of-illness on admission data, or the presence of such medical orders as "Do Not Resuscitate", such material may provide the reader with little, if any, quality of care information.

We urge HCFA to work closely with Hospitals, State Hospital Associations and physician groups to further refine such data prior to public release.

Sincerely,

Christopher I. Maxwell
Vice President, Ancillary Services

CIM/lss
#055

Attachment

COMMUNITY HOSP OF LANCASTER

1175 CLARK ST
LANCASTER, PA 17604

Medicare Hospital Provider Number: 390068

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	997	12	9 - 14	1,078	11	9 - 14
Cancer	28	43	21 - 58	39	33	27 - 59
Cerebrovascular Accidents	29	41	13 - 48	29	21	17 - 47
Gastrointestinal Catastrophes	7	57	14 - 78	7	43	10 - 75
Infectious Disease	12	42	18 - 71	9	11	19 - 68
Metabolic/Electrolyte Disorders	31	10	12 - 41	34	15	9 - 39
Pulmonary Disease	52	27	15 - 41	50	22	13 - 39
Renal Failure	5	40	11 - 85	7	43	7 - 77
Severe Acute Heart Disease	31	39	21 - 55	17	65	20 - 64
Severe Chronic Heart Disease	46	13	11 - 32	51	37	13 - 40
Severe Trauma	0	-	-	2	50	2 - 92
Gastrointestinal Disease	63	6	1 - 20	98	3	1 - 11
Gynecologic Disease	9	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	143	2	2 - 8	166	3	1 - 8
Musculoskeletal/Skin Conditions	92	1	0 - 9	94	1	1 - 9
Neuropsychiatric/Sensory Disease	20	0	0 - 98	26	4	0 - 63
Urologic Disease	64	2	0 - 19	60	0	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	206
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	150
Percent of Physicians Who Are Board Certified Specialists:	61
Interns and Residents:	18
Registered Nurses:	144
Licensed Practical Nurses:	60

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Community Hospital
of Lancaster

October 18, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Re: Hospital Specific
Medicare Mortality Data
Community Hospital of Lancaster
Provider #: 390068

Dear Mrs. Kappert:

We have reviewed the hospital-specific mortality data for Medicare patients in 1987 which was sent to us with Dr. Roper's letter of September 15, 1988.

In reviewing the validity of the raw data for Community Hospital of Lancaster, we found that the mortaility information was essentially correct with the exception of three incorrect death dates out of 104 deaths for patients who died in our facility. The hospital characteristics, however, were grossly erroneous, examples being the total number of beds in 1986 of 208 and not 132 as reported; our occupancy rate of 60.2% rather than 59%, and we had a coronary care unit instead of none as reported.

The overall actual mortality rate for Medicare patients of Community Hospital of Lancaster was 12% which is at the middle of the range of predicted mortality rate. Sixty-two of the 104 mortalities or 60% fell in the high risk category. Seventy-one percent of the patients in the low risk category and 54% of the All Other Diseases category had co-morbidities in their diagnoses.

The average age of the reported mortalities was 77.63 and it is reasonable to believe that the mortality rate for this age category would be high.

We are very aware that this data relates only to Medicare patients and, therefore, is not representative of all patient categories. We have utilized the data to conduct a further review of each case, and are satisfied with the outcome.

While Community Hospital of Lancaster does not oppose HCFA's release of this data, we would certainly be remiss if we failed to point out that we do not believe that there is a valid relationship between this specific mortality data and the quality of health care provided by this or any institution. Hopefully in the future data will contain the severity of the patients illness, thus making such a release more meaningful.

Sincerely,

Joanne Judge Kiser
President

JJK/jmh

COMMUNITY HOSPITAL

NORTH FRALEY STREET
KANE, PA 16735

Medicare Hospital Provider Number: 390104

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	407	14	11 - 19	434	9	10 - 16
Cancer	15	67	30 - 76	6	50	11 - 78
Cerebrovascular Accidents	10	30	8 - 62	13	38	9 - 59
Gastrointestinal Catastrophes	3	0	3 - 80	3	33	8 - 89
Infectious Disease	5	20	9 - 77	1	0	3 - 99
Metabolic/Electrolyte Disorders	4	0	6 - 72	17	18	7 - 49
Pulmonary Disease	27	26	16 - 50	32	16	13 - 41
Renal Failure	1	100	3 - 98	2	50	7 - 96
Severe Acute Heart Disease	23	39	24 - 63	22	27	24 - 61
Severe Chronic Heart Disease	25	32	11 - 48	26	8	12 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	47	0	1 - 11	38	3	0 - 28
Gynecologic Disease	3	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	56	0	2 - 9	59	7	1 - 19
Musculoskeletal/Skin Conditions	36	14	0 - 51	42	0	0 - 16
Neuropsychiatric/Sensory Disease	6	0	0 -100	7	0	0 - 85
Urologic Disease	14	0	0 - 99	17	0	0 - 86

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	53
Occupancy Rate (%):	43
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	35
Percent of Physicians Who Are Board Certified Specialists:	20
Interns and Residents:	0
Registered Nurses:	42
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMMUNITY MEDICAL CTR

1822 MULBERRY ST
SCRANTON, PA 18510

Medicare Hospital Provider Number: 390001

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,876	10	8 - 12	1,868	11	9 - 13
Cancer	45	38	26 - 56	53	36	24 - 53
Cerebrovascular Accidents	56	34	14 - 39	62	24	15 - 38
Gastrointestinal Catastrophes	12	42	11 - 65	12	17	14 - 60
Infectious Disease	30	23	17 - 50	35	26	19 - 52
Metabolic/Electrolyte Disorders	22	9	10 - 42	21	0	9 - 34
Pulmonary Disease	78	18	14 - 34	81	27	14 - 36
Renal Failure	16	50	18 - 75	4	0	10 - 79
Severe Acute Heart Disease	73	41	25 - 50	90	47	28 - 50
Severe Chronic Heart Disease	101	19	13 - 30	125	23	14 - 31
Severe Trauma	3	33	1 - 88	6	50	4 - 75
Gastrointestinal Disease	157	1	1 - 7	135	1	1 - 7
Gynecologic Disease	36	0	0 -100	19	0	0 -100
Low-Risk Heart Disease	259	1	1 - 5	235	1	2 - 6
Musculoskeletal/Skin Conditions	232	1	1 - 6	238	3	0 - 7
Neuropsychiatric/Sensory Disease	49	0	0 - 19	45	0	0 - 16
Urologic Disease	70	1	0 - 14	46	2	0 - 31

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	327
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	117
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	7
Registered Nurses:	311
Licensed Practical Nurses:	124

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CONEMAUGH VALLEY MEMORIAL HOSP

1086 FRANKLIN ST
JOHNSTOWN, PA 15905

Medicare Hospital Provider Number: 390110

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,988	12	9 - 13	3,049	10	9 - 13
Cancer	72	44	28 - 55	69	49	31 - 58
Cerebrovascular Accidents	89	34	17 - 38	101	32	16 - 36
Gastrointestinal Catastrophes	26	31	20 - 58	20	40	17 - 61
Infectious Disease	34	47	19 - 54	29	45	20 - 58
Metabolic/Electrolyte Disorders	52	35	16 - 46	30	27	15 - 50
Pulmonary Disease	111	30	18 - 38	107	25	18 - 37
Renal Failure	12	50	18 - 79	15	20	14 - 69
Severe Acute Heart Disease	122	41	28 - 48	129	41	29 - 48
Severe Chronic Heart Disease	183	17	17 - 30	215	20	17 - 30
Severe Trauma	4	50	2 - 83	3	67	2 - 86
Gastrointestinal Disease	228	4	2 - 8	194	3	1 - 7
Gynecologic Disease	18	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	419	1	2 - 5	437	1	2 - 5
Musculoskeletal/Skin Conditions	254	2	1 - 6	278	0	1 - 4
Neuropsychiatric/Sensory Disease	285	2	1 - 6	272	1	0 - 5
Urologic Disease	130	3	0 - 16	109	2	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 402
Occupancy Rate (%): 62
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 169
Percent of Physicians Who Are Board Certified Specialists: 70
Interns and Residents: 57
Registered Nurses: 357
Licensed Practical Nurses: 78

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

Medicare Provider Number: 39011

Conemaugh Valley Memorial Hospital
1086 Franklin Street Johnstown, PA 15905-4398 (814) 533-9000

RESPONSE TO HCFA MORTALITY DATA

Conemaugh Valley Memorial Hospital (CVMH) is a 412-bed community teaching hospital with several residency training programs, a diploma school of nursing and various allied health training programs. Among the services available at CVMH are a Regional Trauma Center (designated by the Pennsylvania Trauma Systems Foundation), a Regional Intensive Care Nursery and acute psychiatric services.

With respect to the Hospital characteristics data, our 1986 AHA survey reported 107 of 155 physicians as Board Certified. Therefore, our 1986 percentage was 69%, not 50% as published. CVMH's 1987 percentage should read 70%; our AHA survey reported 119 of 169 physicians as Board Certified.

Our mortality data were reviewed and with the exception of 2 patients, were found to be accurate. According to our medical records, these 2 patients did not die at CVMH. However, it should be pointed out that mortality rates, by themselves, do not measure quality or serve as the sole indicator of hospital performance. An appropriate assessment of the quality of care provided at an institution is dependent upon many variables. Mortality data must always be adjusted to reflect measures of severity (i.e., how ill the patient was at the time of admission) and should only be used to guide and direct peer (physician) quality review activities.

A comprehensive, ongoing program to monitor and evaluate the quality of patient care provided is operational at CVMH. The Board of Trustees, Medical Staff and Administration are committed to the delivery of high quality patient care as the primary mission of our institution.

10-17-88

CORRY MEM HOSP

612 W SMITH ST
CORRY, PA 16407

Medicare Hospital Provider Number: 390005

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	454	14	10 - 17	532	12	10 - 17
Cancer	6	50	11 - 78	11	27	20 - 71
Cerebrovascular Accidents	27	37	12 - 48	31	45	14 - 49
Gastrointestinal Catastrophes	1	0	3 - 98	5	0	7 - 65
Infectious Disease	2	0	2 - 89	5	20	10 - 77
Metabolic/Electrolyte Disorders	18	22	7 - 50	19	0	6 - 33
Pulmonary Disease	44	25	16 - 44	44	23	17 - 44
Renal Failure	3	33	7 - 89	1	100	1 - 97
Severe Acute Heart Disease	21	52	26 - 67	25	36	22 - 59
Severe Chronic Heart Disease	30	33	9 - 43	43	28	12 - 40
Severe Trauma	1	100	1 - 97	0	-	-
Gastrointestinal Disease	38	11	0 - 39	36	0	2 - 14
Gynecologic Disease	1	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	96	2	1 - 9	97	2	1 - 9
Musculoskeletal/Skin Conditions	33	0	0 - 34	37	0	0 - 17
Neuropsychiatric/Sensory Disease	9	0	0 -100	10	0	0 -100
Urologic Disease	9	0	0 - 98	8	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	86
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

MEDICARE PROVIDER #: 390005

CORRY MEMORIAL HOSPITAL
612 WEST SMITH STREET, CORRY, PENNSYLVANIA 16407
814-664-4641

October 21, 1988

Health Standards & Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Blvd
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Analysis of the Medicare Hospital Mortality Information (1987) has been performed and at this time, we would like to offer the following comments.

Corry Memorial Hospital falls within the range for predicted morality in all diagnostic categories. The average age of the expired patients is 80 with an average length of stay of 6.5 days. Of the 67 patients that expired, 70% were in a do not resuscitate situation, which means that no extraordinary measures were implemented according to family wishes and 100% of the patients had multiple diagnoses and comorbid conditions associated with their chronic conditions. Fifty-nine or 87% of the patients were admitted through the Emergency Room, twenty-two or 37% of these patients coming to the ER from a nursing home. Fifty-five patients expired at CMH, 4 were discharged home, 6 were discharged to a skilled nursing facility and 2 were transferred to another acute-care facility which should not be computed in our statistics.

The 1987 mortality rates appear to be higher (14%) than those in 1986 (12%); however, this is due only to the fact that HCFA has changed the way the rates are calculated. The review showed that quality patient care was rendered which was appropriate, correct and sensitive to family wishes.

Corry Memorial Hospital is an 86-bed, general, acute not-for-profit hospital which recorded 47.16% occupancy for 1987. Four of the 86 beds are located in a mixed ICU/CCU.

Thank you very much for the opportunity to comment on the upcoming mortality release.

Sincerely,

Raymond A. Graeca
President

RAG/kkw

CROZER CHESTER MEDICAL CENTER

15TH ST UPLAND AVE
UPLAND, PA 19013

Medicare Hospital Provider Number: 390180

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,529	11	11 - 15	2,391	12	11 - 16
Cancer	87	36	29 - 53	88	43	31 - 55
Cerebrovascular Accidents	100	26	16 - 35	109	24	19 - 37
Gastrointestinal Catastrophes	20	30	21 - 63	17	41	19 - 66
Infectious Disease	38	32	20 - 53	29	38	21 - 59
Metabolic/Electrolyte Disorders	46	26	10 - 41	38	24	12 - 44
Pulmonary Disease	104	27	15 - 35	83	25	19 - 41
Renal Failure	26	19	14 - 63	21	33	18 - 72
Severe Acute Heart Disease	119	29	31 - 50	137	28	30 - 48
Severe Chronic Heart Disease	162	12	17 - 29	129	22	17 - 33
Severe Trauma	10	50	9 - 68	12	58	11 - 65
Gastrointestinal Disease	159	6	1 - 11	156	4	1 - 9
Gynecologic Disease	17	0	0 -100	18	0	0 -100
Low-Risk Heart Disease	345	4	2 - 7	261	2	2 - 6
Musculoskeletal/Skin Conditions	169	2	1 - 7	180	3	1 - 8
Neuropsychiatric/Sensory Disease	80	1	1 - 11	86	3	1 - 13
Urologic Disease	109	3	1 - 11	111	4	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	413
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	326
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	13
Registered Nurses:	431
Licensed Practical Nurses:	76

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Crozer-Chester Medical Center • 15th Street & Upland Avenue • Upland Chester, Pa 19013-3995 • (215) 447-2000

October 20, 1988

William L. Roper, M.D., Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, Maryland 21207

Dear Dr. Roper:

Thank you for forwarding the HCFA Mortality data for Crozer-Chester Medical Center. We appreciate the opportunity to review the data prior to its publication in the Federal Register.

Enclosed are our comments to be included in the Federal Register when the HCFA data is released. While we endorse the concept of a fully informed public, we are concerned that the HCFA data will be perceived by the public as a definitive measure of quality care in an individual hospital. We would encourage HCFA to continue its efforts to develop a statistical model that will allow for the complex issues which effect quality patient care and which can be used by consumers in selecting appropriate healthcare services.

Crozer-Chester Medical Center's characteristics included with the mortality data and taken from the 1986 AHA survey are misleading. The data identifies the Medical Center has having only 249 beds. This number includes only medical/surgical beds. In fact Crozer-Chester Medical Center has 450 beds. The data also incorrectly states a ratio of 0.04 interns and residents per bed. This number includes only interns but does not include the 55 full-time resident positions that we maintain as part of our affiliate agreements. The data also does not reflect that the Medical Center began a hospice program in 1987.

If you have any questions regarding this information, please feel free to contact me.

Sincerely,

John C. McMeekin
President

Crozer-Chester Medical Center • 15th Street & Upland Avenue • Upland, Chester Pa 19013-3995 • (215) 447-2000

Medicare Provider Number #39-0180

HCFA MORTALITY DATA

COMMENTS:

Crozer-Chester Medical Center was below the range of predicted mortality in the diagnostic category - severe chronic heart disease. Crozer-Chester Medical Center's mortality rate was zero in the category of gynecologic disease. Crozer-Chester Medical Center was at the lowest point of the range of predicted mortality for the category of neuropsychiatric and sensory disease and for the all causes category Crozer-Chester Medical Center was within the predicted range in all other diagnostic categories.

HCFA states that their data "is not a complete measure of the quality of care." In fact, the data includes only a portion of the total Medicare patient admissions. HCFA included only 2,529 admissions in their data while Crozer-Chester Medical Center actually had more than 14,000 total admissions in 1987. Had the study included all patient admissions, Medicare and non-medicare, the actual mortality rate would be 3%, not the 11% reported. We would strongly recommend that HCFA include all Medicare admissions in future data reports.

The HCFA data is also limited due to its failure to adjust for the condition of the patient at the time of admission. According to HCFA's model, patients transferred from other hospitals to Crozer-Chester Medical Center are counted in Crozer-Chester Medical Center statistics. As a major teaching Medical Center, Crozer-Chester Medical Center provides critical services, including Trauma Center, Burn Treatment Center, Renal Dialysis, and Radiologic Cancer Treatment, that are not available at many hospitals. Last year, more than 450 patients were transferred from other hospitals to Crozer-Chester Medical Center.

The Medical Center's own Quality Assessment Department continually monitors and evaluates the treatment that patients receive to assure that the highest possible standards are met.

Crozer-Chester Medical Center is a 450 bed, voluntary, non-profit Medical Center whose services are available to anyone in need.

DELAWARE CO MEM HOSP

LANSDOWNE KEYSTONE AVES
DREXEL HILL, PA 19026

Medicare Hospital Provider Number: 390081

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,878	12	11 - 15	2,959	11	10 - 14
Cancer	127	37	33 - 54	121	40	30 - 53
Cerebrovascular Accidents	132	21	17 - 33	121	21	19 - 36
Gastrointestinal Catastrophes	29	38	23 - 61	24	42	16 - 57
Infectious Disease	45	33	21 - 52	27	48	22 - 61
Metabolic/Electrolyte Disorders	43	23	12 - 43	41	24	14 - 45
Pulmonary Disease	118	20	18 - 36	107	21	17 - 35
Renal Failure	8	25	16 - 80	10	10	18 - 74
Severe Acute Heart Disease	116	36	29 - 49	110	40	30 - 51
Severe Chronic Heart Disease	176	27	17 - 32	171	20	18 - 32
Severe Trauma	3	0	4 - 79	3	33	9 - 90
Gastrointestinal Disease	240	5	2 - 8	239	2	1 - 6
Gynecologic Disease	14	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	311	4	1 - 7	340	3	2 - 6
Musculoskeletal/Skin Conditions	320	2	1 - 5	335	1	1 - 5
Neuropsychiatric/Sensory Disease	82	5	0 - 16	96	2	0 - 12
Urologic Disease	125	2	0 - 10	116	2	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	303
Occupancy Rate (%):	78
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	263
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	10
Registered Nurses:	302
Licensed Practical Nurses:	82

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

DCMH

Delaware County Memorial Hospital 501 N. Lansdowne Ave. Drexel Hill Pa. 19026 (215) 284-8100

October 17, 1988

Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Mrs. Sandra Kappert

RE: Delaware County Memorial Hospital - Comments on HCFA Release of Hospital-Specific Mortality Rates

Delaware County Memorial Hospital (DCMH) fully supports the provision of useful information to consumers, the media, and other audiences. We share, however, the overwhelmingly held position that crude mortality rates are not valid indications of quality of care, or hospital performance. While we support the full disclosure of valuable information to the public, we do not support the release of statistical information which fails to properly represent the total picture on a very complex subject.

We believe that the federal government - charged by Congress with stewardship of the Medicare program - has once again commissioned a disservice to the public by orchestrating the publication of highly sensitive and emotionally charged information in a fashion determined by most to be seriously flawed. Accordingly, the Health Care Financing Administration (HCFA) is responsible for any public misconceptions or loss of confidence in the nation's 6,000 acute care hospitals.

Since valid conclusions about the quality of care at individual hospitals cannot be made from raw mortality rates, the public should be aware of the following in interpreting these data:

1. The entire study is based upon an untested statistical model, and did not involve the review of a single patient's medical record.

2. The government's study is completely limited to Medicare patients who are typically older and sicker than other groups.

3. The government's study attributes to individual hospitals any death which occurs within 30 days of the last admission during 1987. In other words, patients who died outside the hospital, potentially weeks after their discharge, and of causes totally unrelated to their hospitalization, are counted as a hospital mortality.

4. Valid, scientific studies always measure and control for a wide range of factors. The government's study pays no attention to a patient's general health status, the severity or staging of the patient's illness, whether the patient was admitted from a nursing home or the emergency department, family support, etc. These critical factors were not reviewed because the government failed to read any patient's medical record to establish the cause or circumstances of death.

Delaware County Memorial Hospital (DCMH) supports (and is actively involved in) the growing movement to develop additional measures of quality in health care which can be understood and relied upon by business, labor, and consumers. Hospitals can and do monitor quality, and very aggressively, but not quality expressed as a statistic or a public relations campaign, but as a systematic and rigorous function within every hospital department.

DCMH's Quality Assurance program is a top-ranking management function reporting to the highest organizational level. The department monitors quality of care for every patient, seven days a week, twenty-four hours a day. We work closely with the Department of Health, Keystone Peer Review Organization, Health Care Financing Administration, and the Joint Commission on the Accreditation of Healthcare Organizations. Every medical and professional department in the hospital has a formal quality assurance plan. And, our standards as a hospital go well beyond what is required by JCAH.

In fiscal year 1988, the Joint Commission on the Accreditation of Healthcare Organizations completed its hospital-wide survey of DCMH as part of the voluntary, three-year accreditation process, noting at every level of its inquiry the most positive of findings. We also began implementation this past year of the Pennsylvania Hospital Cost Containment Council's mandated Medisgroups System, hoping to improve the quality and appropriateness of patient care while also providing more sophisticated measurements of length of stay, resource consumption, and severity of illness.

The range of mortality rates at DCMH as reported by HCFA were all within acceptable limits according to HCFA's statistical model. In fact, our actual mortality rates were conspicuously accumulated at the lower end of HCFA's range of predicted rates. All of our rates fell below HCFA's median score with one (1) exception. Nevertheless, since HCFA's statistical model has been uniformly characterized as "crude" and its reliability has not been validated, we take no particular pride as an institution in these numbers.

DCMH is committed to a diligent and comprehensive monitoring of patient care throughout the institution. We will continue to engage in aggressive peer review, data collection and analysis, and internal monitoring in an effort to sustain the highest level of quality for our patients.

The national debate about the quality of health care should continue. We will remain actively involved in the debate and encourage all interested parties to critically assess various quality measures as developed over time. We encourage your participation with DCMH and welcome your comments and opinions.

Sincerely,

RD Thomas

Richard D. Thomas
President

Robert G. Trout, M.D.
Director of Medical Affairs

RDT:RGT:nk

DELAWARE VALLEY MEDICAL CTR

200 OXFORD VALLEY ROAD
LANGHORNE, PA 19047

Medicare Hospital Provider Number: 390069

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,012	12	9 - 14	926	13	10 - 15
Cancer	40	40	29 - 61	25	52	28 - 67
Cerebrovascular Accidents	40	15	14 - 38	44	25	14 - 41
Gastrointestinal Catastrophes	12	33	13 - 65	13	54	12 - 64
Infectious Disease	4	25	9 - 82	6	33	15 - 81
Metabolic/Electrolyte Disorders	10	40	8 - 66	17	12	15 - 52
Pulmonary Disease	57	33	9 - 36	41	22	13 - 41
Renal Failure	4	25	7 - 83	4	75	14 - 91
Severe Acute Heart Disease	25	52	20 - 59	38	32	23 - 53
Severe Chronic Heart Disease	70	17	14 - 33	66	17	13 - 32
Severe Trauma	2	0	2 - 88	3	0	2 - 81
Gastrointestinal Disease	72	3	0 - 15	48	4	0 - 25
Gynecologic Disease	7	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	208	3	1 - 7	159	8	1 - 12
Musculoskeletal/Skin Conditions	68	3	0 - 25	72	0	1 - 8
Neuropsychiatric/Sensory Disease	26	4	0 - 45	37	0	0 - 25
Urologic Disease	31	6	0 -100	22	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	173
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	128
Percent of Physicians Who Are Board Certified Specialists:	51
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

DIVINE PROVIDENCE HOSP

1100 GRAMPIAN BLVD
WILLIAMSPORT, PA 17701

Medicare Hospital Provider Number: 390075

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,488	9	9 - 14	1,546	10	10 - 14
Cancer	65	48	33 - 61	68	43	34 - 61
Cerebrovascular Accidents	50	32	19 - 45	37	30	15 - 45
Gastrointestinal Catastrophes	12	17	16 - 62	7	71	14 - 76
Infectious Disease	5	20	9 - 76	7	29	9 - 71
Metabolic/Electrolyte Disorders	15	20	20 - 63	22	18	13 - 50
Pulmonary Disease	51	12	16 - 37	68	21	17 - 39
Renal Failure	7	29	6 - 75	9	33	15 - 79
Severe Acute Heart Disease	50	36	25 - 53	44	50	27 - 57
Severe Chronic Heart Disease	50	20	14 - 37	58	24	12 - 35
Severe Trauma	4	25	3 - 80	3	0	1 - 82
Gastrointestinal Disease	137	1	1 - 7	112	3	2 - 10
Gynecologic Disease	15	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	150	3	2 - 9	202	2	1 - 7
Musculoskeletal/Skin Conditions	193	1	1 - 5	188	2	1 - 6
Neuropsychiatric/Sensory Disease	59	2	0 - 15	55	0	0 - 15
Urologic Disease	82	1	0 - 11	63	0	1 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 235
Occupancy Rate (%): 57
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 120
Percent of Physicians Who Are Board Certified Specialists: 74
Interns and Residents: 0
Registered Nurses: 156
Licensed Practical Nurses: 89

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

Grampian Boulevard • Williamsport, PA 17701 • (717) 326-8181

Medicare Number 390075

October 17, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, MD 21207

Dear Ms. Kappert:

In response to the "Mortality Information" and "Hospital Characteristics" for Divine Providence Hospital, the following discrepancies are noted:

1. There is not a one-to-one correspondence between the detailed patient listing provided by HCFA and actual data from the patient records. This includes at least 33 errors on the detail list of "Patients whose last discharge in 1987 was from Divine Providence Hospital":
    a. Incorrect HIC #.
    b. Incorrect admission date.
    c. Incorrect discharge date.
    d. Incorrect date of death.
2. Under the "Specialty Services", we do not have an "Organ Transplant Service". This can be verified on our 1987 AHA survey return.

Following a review of this data and reflecting on the previous year's publication of the data only confirms for me the uselessness of this information to the average person. To publish this without any supporting or clarifying information with which one can make judgements about quality of care in an individual hospital serves no purpose.

Many of my colleagues are of the same opinion.

Sincerely,

Sister Jean Mohl

Sister Jean Mohl
President

SJM/kal

DIVINE PROVIDENCE HOSP

1004 ARCH ST
PITTSBURGH, PA 15212

Medicare Hospital Provider Number: 390136

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,553	10	10 - 14	1,626	11	10 - 15
Cancer	47	34	31 - 60	65	49	30 - 57
Cerebrovascular Accidents	67	16	15 - 35	72	22	19 - 40
Gastrointestinal Catastrophes	19	32	15 - 58	20	45	15 - 60
Infectious Disease	20	25	24 - 64	18	39	20 - 65
Metabolic/Electrolyte Disorders	46	24	14 - 45	27	41	10 - 50
Pulmonary Disease	83	20	17 - 37	85	25	17 - 39
Renal Failure	11	27	19 - 79	6	50	5 - 79
Severe Acute Heart Disease	35	34	25 - 57	34	29	25 - 57
Severe Chronic Heart Disease	99	15	14 - 30	129	16	17 - 31
Severe Trauma	1	100	2 - 97	4	25	4 - 80
Gastrointestinal Disease	129	3	1 - 9	136	4	1 - 10
Gynecologic Disease	12	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	156	2	2 - 7	164	2	2 - 8
Musculoskeletal/Skin Conditions	220	2	1 - 7	186	2	1 - 7
Neuropsychiatric/Sensory Disease	86	5	1 - 15	63	5	0 - 23
Urologic Disease	51	0	0 - 16	48	6	0 - 82

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	167
Occupancy Rate (%):	(not available)
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

Medicare Provider # 390136

DIVINE PROVIDENCE HOSPITAL OF PITTSBURGH
1004 ARCH STREET • PITTSBURGH, PENNSYLVANIA 15212 • (412) 323-5600

October 21, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Medicare Hospital Mortality Information (1987)

Medicare Provider # 390136

Dear Mrs. Kappert:

Please publish the following comment with the scheduled December mortality data release:

> Divine Providence of Pittsburgh had one(1) case noted in the severe trauma category. The death of that one(1) patient resulted in a 100% mortality rate in that category.

Sincerely,

Ronald H. Mangold

Ronald H. Mangold,
Administrator

DOYLESTOWN HOSP

595 W STATE ST
DOYLESTOWN, PA 18901

Medicare Hospital Provider Number: 390203

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,903	13	11 - 16	2,030	13	11 - 15
Cancer	69	42	31 - 58	65	52	30 - 58
Cerebrovascular Accidents	104	29	19 - 38	96	29	20 - 40
Gastrointestinal Catastrophes	19	11	18 - 53	20	35	17 - 61
Infectious Disease	30	23	18 - 51	29	38	23 - 60
Metabolic/Electrolyte Disorders	66	27	12 - 40	37	27	9 - 43
Pulmonary Disease	82	29	15 - 38	101	21	19 - 38
Renal Failure	2	0	5 - 90	1	0	3 - 99
Severe Acute Heart Disease	70	30	29 - 52	85	36	28 - 51
Severe Chronic Heart Disease	109	20	17 - 34	108	28	16 - 34
Severe Trauma	8	38	8 - 70	4	25	5 - 81
Gastrointestinal Disease	139	4	1 - 10	160	6	2 - 11
Gynecologic Disease	22	0	0 -100	38	0	0 - 99
Low-Risk Heart Disease	216	6	2 - 9	213	1	2 - 6
Musculoskeletal/Skin Conditions	159	3	1 - 8	176	3	1 - 8
Neuropsychiatric/Sensory Disease	41	5	0 - 34	74	3	0 - 17
Urologic Disease	103	2	1 - 10	95	3	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	213
Occupancy Rate (%):	82
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	114
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	0
Registered Nurses:	256
Licensed Practical Nurses:	67

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DOYLESTOWN HOSPITAL
595 WEST STATE STREET
U.S. ROUTES 202 & 611 BYPASS
DOYLESTOWN, PENNSYLVANIA 18901
215-345-2200

JAROMIR MARIK, F.A.C.H.E.
PRESIDENT & CHIEF EXECUTIVE OFFICER
215-345-2220

October 13, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health & Human Services
200 Independence Avenue, SW
Washington, D.C. 20201

Dear Dr. Roper:

This will acknowledge receipt of your September 15, 1988 letter which had attached selected mortality information on Medicare patients treated by Doylestown Hospital during the calendar years 1986 and 1987. As per your letter, we have reviewed the information you have submitted and respectfully request that a copy of this letter be attached to Doylestown Hospital's statistics when they are published by your Department some time in December, 1988.

After review of the information you provided to us, we offer the following comments on your proposed release of mortality data:

1. The 16 diagnostic categories were broken down into two areas: high risk and low risk. Specifically, 1987 has new information submitted to us and the 1986 data has been re-stated in your latest format to have a comparison. In reviewing all of the patient charts for those patients you had listed in the "low risk" area (a total of 61 patients), we find that all but 5 of those patients had either co-morbid conditions or were inappropriately classified and therefore our records show that 56 of these patients had "high risk" illnesses. As you know, the computer model used to designate these diagnoses will accept only a limited number of co-morbid conditions and therefore does not offer a complete picture, nor in some instances an accurate picture, of the patient's condition.

2. The statistical model utilized by your Department to predict the range of mortality rates has not been tested, has not been proven, and is extremely limited in explaining differences in mortality rates between hospitals. It does not consider the patient's health status at the time of entry into the hospital or the lack of availability of family support. In short, it is

not valid, as you point out in your letter, for determining the quality of care rendered in individual hospitals.

3. The total number of Medicare patients reported on your 1987 list (1,903) does not include multiple admissions of the same patients, nor does it cover a full 12 month actual period. Therefore, the total number of Medicare cases as reported by you is understated and would therefore reflect a higher overall actual mortality rate than is really the case. Our records reflect that we have discharged 3,151 Medicare patients during the calendar year 1987. That is a difference of 1,248 patients or 65.6% more patients than you reported. Based on the number of deaths attributable to your figures, this would reduce our actual mortality rate from 13% to 8%.

   a. However, in reviewing our records, we have identified 5 more Medicare inpatient deaths than the number you reported. Four of these deaths were not on your list at all. One patient was on your list but not listed as a death.

4. We are somewhat concerned with the fact that your statistics include patients who died after discharge from the hospital. Of the total number of deaths reported by you, some 24.5% occurred after discharge from the hospital. We have attempted to ascertain the reason for deaths after discharge. Except for those individuals discharged to our Hospice Program, we have been unable to verify the reasons of death on these patients.

5. During 1987 we had 905 Medicare patient charts reviewed by the Keystone Professional Review Organization. This represents a total of 28.7% of the Medicare discharges for that year. Out of all of those records reviewed, we had no incidents cited by KePRO for quality of care.

6. We note that HCFA's revised 1986 statistics reflect a reduction of total Medicare patients from 2,140, reported by you last year, to 2,030 reported by you this year. Our records continue to reflect total Medicare patients admitted for 1986 to be 2,840.

   a) This, no doubt, is a result of your reclassifying the 1986 data to "match" the 1987 data. This means that the 1986 data reported by HCFA last year was flawed and inappropriate. We suggest that HCFA finalize its criteria based upon some meaningful study prior to releasing this information to an uninformed public. To do otherwise would provide misleading information and be an injustice to consumers.

7. On the Mortality Information summary page there is a block of information entitled "Hospital Characteristics" which was purportedly taken from Doylestown Hospital's AHA 1986 survey. Please be advised that the information contained in this section is not entirely correct pertaining to the following:

   a) Doylestown Hospital has 213 beds - not 140.

   b) The percent of Physicians who are Board Certified Specialists is 80% (93% if you include Board Certified Family Practicioners) - not 60%.

   c) The number of RN's per bed is .975 - not 1.74.

   d) The number of LPN's per bed is .305 - not .52.

   e) Doylestown Hospital does have an Emergency Medical Service but it does not have a shock or burn unit.

   f) Doylestown Hospital has a combined Intensive Care and Coronary Care unit - your information indicated we do not have coronary care.

   g) Doylestown Hospital does not have an Organ Transplant Service - your information indicated that we do.

   h) Doylestown Hospital has a Hospice Program and offers Hospice care - your information indicates that we do not.

We appreciate the opportunity to review and comment on the information prior to public release. As you no doubt understand, this review has taken considerable time and effort on the part of many hospital staff members. We cannot and do not recommend the use of the information by itself to make judgments about the quality of care in an individual hospital or to make comparisons among hospitals. Therefore, we question why this information is being released. Making this information available to KePRO to be used in conjunction with ongoing review of activities can be of assistance in determining areas of concern. This information by itself is of no value to anyone.

Sincerely,

JMarik

J. Marik
President/CEO

M:B:s

CC: Ms. Nancy Blichasz, HAP
Mr. Charles A. Daly, DVHC
Mr. James C. Brownlow, II Doylestown Hospital

DUBOIS REGIONAL MED CNTR

PO BOX 447 MAPLE AVE & 100 HOS
DUBOIS, PA 15801

Medicare Hospital Provider Number: 390086

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,486	12	10 - 15	1,728	12	10 - 15
Cancer	38	53	25 - 59	60	53	34 - 62
Cerebrovascular Accidents	61	38	20 - 45	42	31	16 - 45
Gastrointestinal Catastrophes	15	20	11 - 55	18	39	16 - 62
Infectious Disease	17	47	17 - 64	21	48	17 - 60
Metabolic/Electrolyte Disorders	14	29	13 - 61	19	37	7 - 53
Pulmonary Disease	64	31	18 - 43	78	23	21 - 42
Renal Failure	16	25	16 - 70	8	63	18 - 84
Severe Acute Heart Disease	54	43	25 - 53	62	37	26 - 52
Severe Chronic Heart Disease	76	24	12 - 33	97	26	16 - 35
Severe Trauma	1	100	0 - 99	0	-	-
Gastrointestinal Disease	135	1	1 - 7	149	0	2 - 5
Gynecologic Disease	11	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	164	1	2 - 6	240	3	2 - 7
Musculoskeletal/Skin Conditions	125	2	1 - 9	187	2	1 - 7
Neuropsychiatric/Sensory Disease	46	0	2 - 12	73	1	0 - 13
Urologic Disease	89	1	0 - 10	90	4	1 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	259
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	206
Licensed Practical Nurses:	99

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

DuBois Regional Medical Center

Partners in Progress . . . for Life

October 21, 1988

William L. Roper, M.D.
Administrator
Department of Health & Human Services
Health Care Financing Administration
Washington, D.C.

RE: HCFA 1987 Mortality Data Medicare Provider: #39-0086

Dear Doctor Roper:

The DuBois Regional Medical Center would like to submit the following comments regarding the 1987 HCFA Mortality Data. An analysis of the data revealed that 33 patients died within 30 days of admission to DRMC but not during hospitalization at DRMC. It is impossible for us to verify the accuracy of the figures regarding patients who died after discharge as information concerning death after discharge is not included in the patient's medical record. Without detailed information concerning the billing data available to HCFA in computing the predicted mortality rates, it is impossible for us to verify the accuracy of the diagnostic or other data used in your analysis. In 15 of the diagnostic categories, the Medical Center's actual mortality rate falls inside the range of the predicted mortality rate. In two of the diagnostic categories, the Medical Center's rate falls below the range of the predicted mortality rate.

We again are concerned that deaths counted in the 1987 mortality data but which occurred in a subsequent year not be included again in the 1988 mortality data.

We feel that it must be stressed that the Mortality Data by itself is not a complete measure of the quality of care at an individual hospital and that until additional statistical measures are developed to deal with complex issues such as severity of illness, the data must not be used to make judgments about the quality of care in an individual hospital or to make comparisons among hospitals.

Thank you for the opportunity to review, evaluate and comment on the data.

Sincerely yours,

Peter W. Monge,
Chief Executive Officer

P.O. Box 447
DuBois, Pennsylvania 15801
Telephone (814) 375-4321, East Unit
(814) 371-2200, West Unit

Writer's Direct Dial No.: 375-3385

PWM/mkf

EASTON HOSP

21ST LEHIGH STS
EASTON, PA 18042

Medicare Hospital Provider Number: 390162

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,262	11	10 - 14	3,232	10	10 - 14
Cancer	91	46	28 - 53	97	37	30 - 53
Cerebrovascular Accidents	120	22	19 - 36	116	25	19 - 37
Gastrointestinal Catastrophes	29	28	20 - 56	24	13	26 - 59
Infectious Disease	33	48	21 - 57	28	32	18 - 55
Metabolic/Electrolyte Disorders	59	27	13 - 42	63	14	15 - 39
Pulmonary Disease	173	25	19 - 36	174	20	17 - 34
Renal Failure	14	29	10 - 67	11	36	18 - 79
Severe Acute Heart Disease	145	34	30 - 48	144	36	32 - 51
Severe Chronic Heart Disease	196	15	16 - 28	163	23	17 - 32
Severe Trauma	1	0	0 - 97	3	0	2 - 81
Gastrointestinal Disease	226	4	1 - 8	239	1	1 - 6
Gynecologic Disease	17	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	546	2	2 - 5	532	3	2 - 6
Musculoskeletal/Skin Conditions	277	2	1 - 6	305	1	1 - 5
Neuropsychiatric/Sensory Disease	75	7	1 - 18	60	7	0 - 31
Urologic Disease	120	2	1 - 10	117	2	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	369
Occupancy Rate (%):	68
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	195
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	26
Registered Nurses:	249
Licensed Practical Nurses:	70

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ELIZABETHTOWN HOSPITAL & REHAB CENTE

ELIZABETHTOWN,, PA 17022

Medicare Hospital Provider Number: 390276

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2	0	0 -100	0	-	-
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	0	-	-
Musculoskeletal/Skin Conditions	1	0	0 -100	0	-	-
Neuropsychiatric/Sensory Disease	0	-	-	0	-	-
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	55
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	72
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ELK COUNTY GENERAL HOSPITAL

94 HOSP ST
RIDGWAY, PA 15853

Medicare Hospital Provider Number: 390161

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	351	12	10 - 17	375	14	10 - 18
Cancer	9	67	22 - 79	10	90	32 - 77
Cerebrovascular Accidents	16	13	11 - 47	25	8	18 - 44
Gastrointestinal Catastrophes	1	0	0 - 99	4	50	14 - 90
Infectious Disease	2	50	4 - 93	4	50	9 - 85
Metabolic/Electrolyte Disorders	3	0	3 - 80	3	0	9 - 82
Pulmonary Disease	25	12	11 - 40	22	41	12 - 53
Renal Failure	0	-	-	1	100	3 - 99
Severe Acute Heart Disease	18	61	20 - 64	13	46	19 - 70
Severe Chronic Heart Disease	23	22	11 - 46	18	22	9 - 49
Severe Trauma	0	-	-	1	100	2 - 97
Gastrointestinal Disease	38	0	1 - 14	29	3	1 - 28
Gynecologic Disease	4	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	53	4	1 - 18	63	2	2 - 12
Musculoskeletal/Skin Conditions	26	4	0 - 44	36	6	0 - 45
Neuropsychiatric/Sensory Disease	7	0	0 -100	7	0	0 - 93
Urologic Disease	3	0	0 -100	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	83
Occupancy Rate (%):	43
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	18
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	46
Licensed Practical Nurses:	23

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ELLWOOD CITY HOSP

724 PERSHING ST
ELLWOOD CITY, PA 16117

Medicare Hospital Provider Number: 390008

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,052	10	11 - 16	1,031	10	10 - 15
Cancer	25	48	29 - 68	15	53	22 - 71
Cerebrovascular Accidents	30	20	11 - 42	37	27	14 - 44
Gastrointestinal Catastrophes	9	11	12 - 62	5	40	12 - 83
Infectious Disease	15	13	17 - 57	2	50	6 - 95
Metabolic/Electrolyte Disorders	12	33	11 - 63	25	16	11 - 45
Pulmonary Disease	78	22	20 - 41	94	18	17 - 36
Renal Failure	7	43	13 - 82	2	100	10 - 95
Severe Acute Heart Disease	59	22	27 - 50	51	43	27 - 56
Severe Chronic Heart Disease	70	14	15 - 33	67	18	12 - 32
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	76	3	1 - 12	78	1	1 - 10
Gynecologic Disease	13	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	166	4	1 - 8	170	3	1 - 8
Musculoskeletal/Skin Conditions	90	7	0 - 17	78	4	1 - 14
Neuropsychiatric/Sensory Disease	20	0	1 - 28	17	0	0 - 96
Urologic Disease	37	0	0 - 43	56	0	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	125
Occupancy Rate (%):	58
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	30
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	77
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

EPHRATA COMM HOSP

MARTIN AVE
EPHRATA, PA 17522

Medicare Hospital Provider Number: 390225

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,023	13	9 - 14	1,030	10	10 - 15
Cancer	26	54	25 - 64	28	32	24 - 60
Cerebrovascular Accidents	37	30	15 - 45	31	19	17 - 46
Gastrointestinal Catastrophes	7	43	5 - 72	5	20	8 - 76
Infectious Disease	9	0	18 - 57	13	31	16 - 66
Metabolic/Electrolyte Disorders	23	17	11 - 47	23	17	8 - 45
Pulmonary Disease	46	30	11 - 39	47	30	13 - 41
Renal Failure	6	50	6 - 79	5	40	12 - 86
Severe Acute Heart Disease	52	35	25 - 52	61	30	28 - 53
Severe Chronic Heart Disease	53	25	10 - 35	51	24	14 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	114	4	1 - 10	114	1	1 - 7
Gynecologic Disease	14	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	142	4	1 - 9	150	5	1 - 10
Musculoskeletal/Skin Conditions	93	1	1 - 8	100	1	1 - 8
Neuropsychiatric/Sensory Disease	13	0	0 -100	22	5	0 - 86
Urologic Disease	48	2	0 - 45	41	2	0 - 42

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	134
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	54
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	0
Registered Nurses:	105
Licensed Practical Nurses:	36

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

EPISCOPAL HOSPITAL

FRONT ST LEHIGH AVE
PHILADELPHIA, PA 19125

Medicare Hospital Provider Number: 390235

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,389	10	8 - 13	1,349	11	9 - 14
Cancer	50	26	28 - 55	50	42	31 - 61
Cerebrovascular Accidents	36	11	13 - 36	50	12	17 - 38
Gastrointestinal Catastrophes	8	13	14 - 67	9	11	15 - 64
Infectious Disease	24	42	18 - 58	17	35	17 - 63
Metabolic/Electrolyte Disorders	29	17	13 - 46	24	25	15 - 53
Pulmonary Disease	38	37	13 - 45	31	19	10 - 41
Renal Failure	7	0	10 - 65	5	40	6 - 81
Severe Acute Heart Disease	52	40	22 - 50	45	47	24 - 54
Severe Chronic Heart Disease	65	22	12 - 34	69	16	14 - 33
Severe Trauma	2	0	2 - 89	5	40	4 - 78
Gastrointestinal Disease	70	4	1 - 17	78	4	0 - 17
Gynecologic Disease	8	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	357	6	2 - 7	290	6	1 - 8
Musculoskeletal/Skin Conditions	89	1	0 - 11	97	2	0 - 11
Neuropsychiatric/Sensory Disease	64	0	0 - 10	67	1	1 - 12
Urologic Disease	32	6	0 - 93	45	0	0 - 88

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 320
Occupancy Rate (%): 67
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 269
Percent of Physicians Who Are Board Certified Specialists: 61
Interns and Residents: 40
Registered Nurses: 211
Licensed Practical Nurses: 51

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

EVANGELICAL COMMUNITY HOSPITAL

ONE HOSPITAL DRIVE
LEWISBURG, PA 17837

Medicare Hospital Provider Number: 390013

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,447	12	11 - 16	1,547	13	11 - 16
Cancer	39	41	27 - 60	33	39	28 - 62
Cerebrovascular Accidents	56	20	17 - 40	62	24	21 - 43
Gastrointestinal Catastrophes	10	40	15 - 72	16	25	15 - 60
Infectious Disease	17	24	17 - 59	23	43	21 - 62
Metabolic/Electrolyte Disorders	17	35	7 - 55	15	47	9 - 59
Pulmonary Disease	112	25	15 - 34	98	18	17 - 35
Renal Failure	2	50	6 - 95	3	100	18 - 94
Severe Acute Heart Disease	80	34	29 - 52	84	33	29 - 51
Severe Chronic Heart Disease	121	26	15 - 33	114	28	18 - 36
Severe Trauma	1	0	1 - 97	2	0	1 - 89
Gastrointestinal Disease	123	4	1 - 11	144	3	1 - 9
Gynecologic Disease	12	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	222	6	1 - 9	219	4	2 - 8
Musculoskeletal/Skin Conditions	123	4	1 - 11	143	5	1 - 11
Neuropsychiatric/Sensory Disease	46	2	1 - 18	35	0	0 - 21
Urologic Disease	36	0	0 - 58	56	2	0 - 37

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	155
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	84
Percent of Physicians Who Are Board Certified Specialists:	55
Interns and Residents:	0
Registered Nurses:	123
Licensed Practical Nurses:	29

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

EYE AND EAR HOSP OF PITTSBURGH

230 LOTHROP ST
PITTSBURGH, PA 15213

Medicare Hospital Provider Number: 390143

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	917	1	3 - 7	981	1	3 - 7
Cancer	26	19	21 - 54	24	17	28 - 61
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	1	0	0 - 99	1	0	3 - 99
Infectious Disease	5	0	3 - 64	3	0	2 - 80
Metabolic/Electrolyte Disorders	4	0	1 - 76	4	25	3 - 80
Pulmonary Disease	0	-	-	1	0	0 -100
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	1	0	1 - 97	1	0	1 - 97
Gastrointestinal Disease	34	0	0 - 26	28	0	0 - 48
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	2	0	0 -100	3	0	0 -100
Musculoskeletal/Skin Conditions	20	0	0 - 58	16	0	0 - 94
Neuropsychiatric/Sensory Disease	600	0	1 - 4	625	0	1 - 4
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 62
Occupancy Rate (%): 61
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 141
Percent of Physicians Who Are Board Certified Specialists: 24
Interns and Residents: 0
Registered Nurses: 113
Licensed Practical Nurses: 4

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: No
Cardiac Intensive Care: No
Organ Transplant Service: Yes
Hospice Care: No

EYE & EAR
HOSPITAL
OF PITTSBURGH

Affiliate, Medical and
Health Care Division,
University
of Pittsburgh

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Re: Hospital I.D.# 390143

Dear Mrs. Kappert:

Enclosed are comments regarding the mortality rates for Eye & Ear Hospital of Pittsburgh. Please note the corrections to the Hospital Characteristics listed by HCFA as follows:

SURVEY & YEAR: AHA 1987

Beds (#)	62
Occupancy Rate (%)	68
Interns and Residents per Bed	.34
Registered Nurses per Bed	1.6
Licensed Practical Nurses per Bed	.03

Sincerely,

Patricia Shehorn

Patricia Shehorn
Administrator

enclosure

MEDICARE PROVIDER NUMBER 390143

The following are the comments of Eye & Ear Hospital of Pittsburgh, Pennsylvania (Eye & Ear) regarding the mortality rates compiled by HCFA. As a sixty-two bed academic specialty hospital in the fields of eye, ear, nose and throat, and head and neck cancer care, Eye & Ear serves as a regional referral center and as a teaching facility for the University of Pittsburgh School of Medicine. While pleased that its own mortality rates are very low, Eye & Ear wishes to emphasize that these figures by not represent the sole or the most significant measure of the care provided by its physicians and hospital staff. Nearly all of the deaths which occur at Eye & Ear involve cancer patients, many of whom who are extremely ill upon admission. The head and neck cancer and cranial base tumor patients who are referred to Eye & Ear typically undergo highly complex and extensive surgical procedures. Attempting to evaluate the care provided in such specialty areas based on mortality information alone could produce unreliable and misleading results. Thus review of mortality data is only a single aspect of Eye & Ear's wide-ranging efforts to monitor and improve the quality of care it provides.

Data Analysis

Five of the nine deaths identified by HCFA as involving Eye & Ear Medicare patients within the parameters of the 1987 calendar year involved cancer diagnoses. Three of these patients died in the Hospital, one was discharged to a hospital and one was discharged home at the family's request. All of these deaths involved patients who were gravely ill upon admission and none of the deaths was unanticipated.

FORBES METROPOLITAN HEALTH CENTER

225 PENN AVE
PITTSBURGH, PA 15221

Medicare Hospital Provider Number: 390172

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,701	13	10 - 15	1,732	11	10 - 15
Cancer	48	48	29 - 59	49	35	25 - 55
Cerebrovascular Accidents	71	35	18 - 42	57	35	17 - 42
Gastrointestinal Catastrophes	18	22	14 - 56	14	21	17 - 62
Infectious Disease	23	65	22 - 62	13	69	21 - 70
Metabolic/Electrolyte Disorders	29	21	11 - 46	35	34	14 - 49
Pulmonary Disease	84	23	16 - 37	98	23	19 - 39
Renal Failure	9	33	17 - 80	8	50	15 - 82
Severe Acute Heart Disease	54	50	26 - 53	51	39	27 - 54
Severe Chronic Heart Disease	90	23	16 - 35	119	20	17 - 33
Severe Trauma	5	20	6 - 75	7	14	12 - 70
Gastrointestinal Disease	151	5	1 - 10	160	4	1 - 9
Gynecologic Disease	5	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	244	5	2 - 8	235	2	2 - 6
Musculoskeletal/Skin Conditions	155	3	2 - 9	171	5	1 - 9
Neuropsychiatric/Sensory Disease	29	0	0 - 23	43	0	0 - 15
Urologic Disease	84	0	0 - 8	78	4	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	144
Occupancy Rate (%):	81
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	365
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	0
Registered Nurses:	132
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FORBES REGIONAL HEALTH CENTER

2570 HAYMAKER RD
MONROEVILLE, PA 15146

Medicare Hospital Provider Number: 390267

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,891	11	10 - 14	3,061	11	10 - 14
Cancer	87	48	32 - 57	102	38	31 - 55
Cerebrovascular Accidents	139	30	19 - 36	103	21	21 - 39
Gastrointestinal Catastrophes	27	41	20 - 59	23	35	19 - 60
Infectious Disease	43	28	23 - 54	41	32	24 - 56
Metabolic/Electrolyte Disorders	41	39	16 - 50	53	21	15 - 43
Pulmonary Disease	151	19	18 - 34	129	31	18 - 37
Renal Failure	18	61	22 - 77	12	25	20 - 78
Severe Acute Heart Disease	98	43	27 - 49	109	48	28 - 48
Severe Chronic Heart Disease	144	18	18 - 32	184	18	17 - 31
Severe Trauma	5	20	7 - 76	3	100	8 - 82
Gastrointestinal Disease	278	4	1 - 7	279	2	1 - 6
Gynecologic Disease	13	0	0 -100	24	0	0 -100
Low-Risk Heart Disease	344	2	2 - 6	364	3	2 - 6
Musculoskeletal/Skin Conditions	264	2	1 - 6	308	2	1 - 6
Neuropsychiatric/Sensory Disease	70	1	1 - 11	93	4	1 - 13
Urologic Disease	147	1	1 - 6	168	2	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 352
Occupancy Rate (%): 71
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 295
Percent of Physicians Who Are Board Certified Specialists: 74
Interns and Residents: 18
Registered Nurses: 313
Licensed Practical Nurses: 10

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

FORBES HEALTH SYSTEM
Medical Services Office • 2570 Haymaker Road • Monroeville, Pennsylvania 15146 • 412/273-2435

October 17, 1988

Health Standards and Quality
Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

Attached is the Forbes Health System reply on the 1987 HCFA Mortality Release as requested in your letter of September 13, 1988.

If you have any questions pertaining to the contents of this report, please feel free to contact me at (412) 273-2434.

Sincerely,

Richard N. McGarvey MD

Richard N. McGarvey, M.D.
Medical Director

RNM/kmp
Attachment

The statistical data is more accurate than last year although some of the same reservations about the format persist.

1. We do not believe that the data is interpretable without the cases being classified by some system as to severity of illness. Our review of all our deaths in categories which have exceeded the mean of the predicted range for that category will include a designation of severity according to MedisGroups. This severity grading will be of significant value in patients who are Dead on Arrival or die within 24 hours of admission. It will also give proper weight to patients with terminal illness. Nor does it seem that sufficient allowance is given to the number of patients where CPR is not permitted by the patient or his surrogate. Perhaps this is possible only on internal review but it does skew the numbers.

2. We recognize the need to include patients who have died within a certain period after discharge. Their therapy during the previous admission may have been involved in their subsequent death, i.e., within 30 days. On the other hand, it may not have been involved. For example, [redacted]. Yet this patient was included in the hospital deaths. These reservations constitute some of our general concerns about the HCFA process of presenting mortality data.

Commentary Regarding "Characteristics"

1. It is apparent that only medical/surgical beds have been included in the "characteristics", not the total number. This is apparently true for all three Health Centers (Forbes Regional, Forbes Metropolitan, and Highlands) in the Forbes Health System.

2. Obviously, if the number of beds is incorrect, as it is for the three Health Centers in Forbes, then the "occupancy rate", the "interns and residents per bed", the "registered nurses per bed" and the "licensed practical nurses per bed" are all incorrect. HCFA must define what "beds" means exactly, i.e., "med/surg, total?"

3. HCFA failed to include Hospice care provided by the Forbes Health System. Forbes Hospice, an integral part of Forbes Health System, was one of the first hospices established in this part of the country.

4. HCFA erroneously indicated that both Forbes Metropolitan and Forbes Regional have organ transplant service. In fact, those centers merely have an affiliation with the Pittsburgh Transplant Foundation to provide suitable donor organs.

Specific inaccuracies for each of the three Health Centers in Forbes are as follows:

A. **Forbes Metropolitan Health Center:**

1. The HCFA data indicates that the bed number is 119 and then states that occupancy is 80%. In fact, the number of beds is 144 and 80% occupancy would be correct for 144 beds. But for 119 beds, the occupancy would be 96%.

2. HCFA states that the total number of physicians is 301 according to AHA statistics for 1986. The percentage of Board Certified physicians is 51% when in fact 194 or 64% are Board Certified. It should be noted that all physicians coming on the "active staff" at Forbes Health System must be Board Certified or Board Eligible.

3. HCFA's calculation of Registered Nurses and Licensed Practical Nurses appears to assume that each part-time employee works on the average of 20 hours per week rather than actual hours worked. The number of RN's and LPN's per bed also excludes agency staffing.

4. HCFA apparently does not recognize a mixed ICU/CCU when listing a "Coronary Care Unit." It would seem appropriate to list both for better public understanding.

B. **Forbes Regional Health Center:**

1. They are credited with 224 beds when in fact the number in 1986 was 348.

2. While Forbes Regional does not have a dedicated coronary care unit, it does have an 18-bed combined ICU/CCU and it might appear to the public that proper monitoring for cardiac patients is not available. This is an inaccurate portrayal of the facility.

C. **Highlands Hospital and Health Center:**

1. The number of licensed beds is 69 not 44 as stated by HCFA.

2. The total number of staff physicians is correctly reported as 48 by HCFA, but the number that are Board Certified is 58% (28) not 36%.

3. Under Specialty Services, since Highlands is a part of the Forbes Health System as is Forbes Hospice, it shares in the availability and use of the Hospice.

In conclusion:

1. The mortality statistics seem more correct than in 1986.

2. The Hospital characteristics are shot with inaccuracies to the extent that this portion of the report should not be published this year since it would be more misleading than informative.

3. The selective listing of "specialty services" may mislead readers about the hospitals. On what basis were those particular services selected?

FRANKFORD HOSP

RED LION KNIGHTS RDS
PHILADELPHIA, PA 19114

Medicare Hospital Provider Number: 390115

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,232	12	10 - 14	3,174	13	11 - 15
Cancer	85	35	27 - 51	86	43	31 - 56
Cerebrovascular Accidents	163	21	19 - 33	139	23	19 - 35
Gastrointestinal Catastrophes	31	48	18 - 56	37	30	20 - 54
Infectious Disease	39	33	21 - 54	36	36	22 - 56
Metabolic/Electrolyte Disorders	60	28	16 - 44	73	21	13 - 38
Pulmonary Disease	175	26	17 - 34	158	30	15 - 33
Renal Failure	4	25	10 - 86	3	67	6 - 89
Severe Acute Heart Disease	175	29	30 - 46	197	39	30 - 47
Severe Chronic Heart Disease	173	16	16 - 29	157	21	16 - 31
Severe Trauma	7	43	4 - 72	14	7	14 - 53
Gastrointestinal Disease	167	2	1 - 8	201	2	1 - 7
Gynecologic Disease	21	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	393	3	2 - 6	372	3	2 - 6
Musculoskeletal/Skin Conditions	341	3	1 - 6	289	4	1 - 7
Neuropsychiatric/Sensory Disease	99	4	1 - 12	89	3	0 - 15
Urologic Disease	142	3	0 - 11	106	4	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 316
Occupancy Rate (%): 88
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 357
Percent of Physicians Who Are Board Certified Specialists: 62
Interns and Residents: 22
Registered Nurses: 417
Licensed Practical Nurses: 58

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

FRANKFORD
HOSPITAL
Philadelphia, PA 19114

Dedicated to your well-being

John B. Neff, F.A.C.H.E., President

October 19, 1988

Sandra Kappert
Health Standards & Quality Bureau
HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

RE: HCFA Mortality Rates

Dear Mrs. Kappert:

Please find enclosed the comments of Frankford Hospital regarding the Medicare Mortality Information. We understand that these comments will be included in the final publication of the hospital specific data.

Please call this office at (215) 934-4102 if you have any questions concerning this information.

Sincerely,

Michele Urofsky /cm

Michele L. Urofsky
Vice President

MLU/jlk

Enclosure

October 19, 1988
Frankford Hospital, Phila., PA
#390115

RE: HCFA Mortality Rates

Once again, members of Frankford Hospital's administrative and medical staffs have analyzed HCFA's Medicare Mortality Information and have reviewed the relevant medical record documentation to evaluate quality and appropriateness of care provided. As before, our rates fell within or below the predicted ranges.

We remain in agreement that a public educated about the cost and quality of health care can make an informed decision when choosing a health care provider. However, mortality rates are neither satisfactory nor sufficient indicators of quality or appropriateness of care. Alone, they can do no more than identify potential areas for further review. An informed public must be aware of this limitation of the mortality data, in addition to several other concerns arising from Frankford Hospital's review of the data, as outlined below.

I. Informational Errors

[redacted]

This patient expired on [redacted], not [redacted] as listed.

II. Categorization Issues

A. Principal Diagnosis: High vs. Low Risk

HCFA is still sorting patients into 16 categories: 10 labelled "high risk", 6 labelled "low risk". When grouping patients into these categories, HCFA considered only the principal diagnosis, in other words, the diagnosis that after study, was determined to have caused the hospital admission. Many Medicare patients have other medical conditions which also require treatment and impact on the hospital stay and patient's risk level. These conditions were not considered in categorizing patients. Therefore, in many instances, patients placed in "low risk" categories by HCFA were in fact, not low risk patients. Our hospital specific case review verifies this fact. For example, a patient admitted with hematuria (blood in urine) was placed in the "low risk" Urologic Disease category in spite of the fact that this patient also suffered from terminal lung cancer which caused his death some time after discharge. Therefore, classifying such patients as "low risk" based on principal diagnosis alone is misleading.

Further, it is important to note that, as above, the principal diagnosis may not be at all related to the cause of death.

B. Severity/Chronicity

There continues to be no mechanism in the HCFA model to account for the severity or the chronic nature of an illness. Our review of the Frankford Hospital mortality data demonstrated that some patients were so ill upon admission they could not have been expected to survive. Further, other patients were suffering from longstanding conditions such as chronic lung and/or heart disease. By their very nature, chronic conditions are debilitating and ultimately will cause or contribute to the death of a patient.

The HCFA data still do not reflect that some patients with chronic or severe conditions instructed the hospital and their physicians not to take extraordinary treatment measures. The right to die with dignity is not considered in these statistics but in our review affected the Frankford Hospital mortality rates. In addition, our review of patients' records indicates that a number of patients and their families formally requested, often against medical advice, to leave the hospital to die at home.

C. Factors Beyond the Control of the Hospital

Patients' personal situations, such as living arrangements, economic conditions, compliance with prescribed medications/diets/follow-up therapies, and family support can impact their health and ability to survive. These and other factors related to patients' preadmission and post-discharge circumstances, although they can affect the mortality statistics, are beyond the direct control of the hospital.

III. American Hospital Association Data

We have the following concerns regarding the AHA data being published:

1. "Interns and Residents per Bed" is a misleading heading because the AHA survey requests the number of "medical residents on the hospital payroll" but excludes all other residents, for example those provided through a contractual affiliation with an approved residency program. While these other residents are not on the hospital's payroll, they are in service at the hospital and should also be counted. For Frankford Hospital, the number of interns and residents is 50.
2. We are concerned that the report indicates the absence of a Coronary Care Unit at Frankford Hospital. This hospital, like many others, did not have a separate dedicated CCU in June, 1986. It did, however, have dedicated cardiac care rooms within the mixed ICCU and was constructing additional dedicated cardiac care rooms within a Progressive Care Unit which opened in September, 1987. Unless HCFA publishes the fact that a Med/Surg ICU can include dedicated cardiac care beds, the AHA data will misrepresent the hospital's capabilities for provision of specialized intensive cardiac care and could mislead the public when they review this information.

In summary, the public is entitled to valid and reliable information about the quality of health care provided. However, it should be noted that the methods utilized by HCFA are still in the developmental stage, and the data being published are limited in their ability to measure quality. Most hospitals, including Frankford Hospital, have comprehensive quality assurance programs in place and constantly review their quality of care. They review the cases of patients who die to determine whether quality, appropriate care was given. These quality assurance programs consider many factors besides death rates and give a more complete picture than the data being published.

FRANKLIN REGIONAL MEDCL CNTR

1 SPRUCE ST
FRANKLIN, PA 16323

Medicare Hospital Provider Number: 390091

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,937	10	11 - 15	2,124	10	11 - 15
Cancer	74	27	38 - 62	88	49	43 - 68
Cerebrovascular Accidents	73	21	20 - 40	55	20	18 - 41
Gastrointestinal Catastrophes	9	67	16 - 74	17	41	26 - 73
Infectious Disease	18	72	23 - 65	40	22	27 - 57
Metabolic/Electrolyte Disorders	14	7	4 - 45	24	13	7 - 41
Pulmonary Disease	130	32	20 - 39	113	19	18 - 37
Renal Failure	7	57	22 - 92	6	50	17 - 88
Severe Acute Heart Disease	57	37	27 - 53	67	40	28 - 52
Severe Chronic Heart Disease	95	17	17 - 33	96	17	19 - 35
Severe Trauma	3	0	2 - 80	2	0	2 - 89
Gastrointestinal Disease	189	2	2 - 7	180	2	3 - 8
Gynecologic Disease	19	0	0 - 83	21	0	0 -100
Low-Risk Heart Disease	273	4	2 - 7	266	3	2 - 7
Musculoskeletal/Skin Conditions	200	0	1 - 5	247	1	1 - 5
Neuropsychiatric/Sensory Disease	62	2	1 - 12	92	2	0 - 13
Urologic Disease	74	1	0 - 12	88	0	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 200
Occupancy Rate (%): 68
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 61
Percent of Physicians Who Are Board Certified Specialists: 89
Interns and Residents: 3
Registered Nurses: 213
Licensed Practical Nurses: 65

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

FRICK COMMUNITY HEALTH CENTER

508 SOUTH CHURCH ST
MOUNT PLEASANT, PA 15666

Medicare Hospital Provider Number: 390217

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,648	11	10 - 14	1,690	11	9 - 14
Cancer	52	42	29 - 59	42	52	31 - 63
Cerebrovascular Accidents	65	26	17 - 39	62	18	18 - 39
Gastrointestinal Catastrophes	13	38	12 - 63	19	42	15 - 60
Infectious Disease	14	21	15 - 60	20	50	19 - 63
Metabolic/Electrolyte Disorders	28	18	14 - 47	18	17	11 - 50
Pulmonary Disease	58	21	16 - 40	50	28	16 - 43
Renal Failure	11	55	15 - 77	5	40	13 - 87
Severe Acute Heart Disease	63	32	25 - 50	51	43	25 - 53
Severe Chronic Heart Disease	143	22	16 - 31	125	23	15 - 32
Severe Trauma	1	0	0 - 97	2	50	1 - 92
Gastrointestinal Disease	140	1	1 - 7	153	4	1 - 9
Gynecologic Disease	15	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	262	2	2 - 6	285	3	2 - 6
Musculoskeletal/Skin Conditions	153	3	1 - 9	164	1	1 - 6
Neuropsychiatric/Sensory Disease	29	7	0 - 80	39	3	0 - 29
Urologic Disease	80	2	0 - 13	105	2	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 210
Occupancy Rate (%): 64
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 73
Percent of Physicians Who Are Board Certified Specialists: 48
Interns and Residents: 0
Registered Nurses: 160
Licensed Practical Nurses: 39

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

FULTON COUNTY MED CTR

216 S 1ST ST
MCCONNELLSBURG, PA 17233

Medicare Hospital Provider Number: 390209

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	291	14	8 - 17	283	14	10 - 18
Cancer	5	40	12 - 83	5	40	7 - 79
Cerebrovascular Accidents	11	27	8 - 60	9	22	10 - 64
Gastrointestinal Catastrophes	1	0	0 - 99	2	50	0 - 94
Infectious Disease	4	0	8 - 72	1	100	2 - 97
Metabolic/Electrolyte Disorders	2	0	0 - 95	9	33	6 - 65
Pulmonary Disease	18	17	11 - 49	35	26	10 - 41
Renal Failure	2	50	6 - 95	3	67	5 - 88
Severe Acute Heart Disease	15	40	16 - 63	21	24	19 - 56
Severe Chronic Heart Disease	27	19	9 - 40	17	24	9 - 50
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	23	9	0 - 73	15	0	0 - 57
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	54	6	0 - 28	43	2	1 - 18
Musculoskeletal/Skin Conditions	28	0	0 - 31	25	4	0 - 42
Neuropsychiatric/Sensory Disease	9	0	0 -100	8	0	0 - 97
Urologic Disease	5	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	100
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	47
Interns and Residents:	0
Registered Nurses:	20
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GEISINGER MEDICAL CTR

N ACADEMY AVE
DANVILLE, PA 17822

Medicare Hospital Provider Number: 390006

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,270	11	10 - 14	4,388	11	10 - 14
Cancer	216	30	31 - 49	220	31	33 - 51
Cerebrovascular Accidents	140	21	17 - 32	139	23	19 - 36
Gastrointestinal Catastrophes	42	45	22 - 56	51	47	22 - 55
Infectious Disease	63	37	23 - 51	66	24	27 - 53
Metabolic/Electrolyte Disorders	44	18	18 - 47	34	32	14 - 49
Pulmonary Disease	119	23	18 - 36	122	25	19 - 38
Renal Failure	45	44	13 - 61	25	28	14 - 66
Severe Acute Heart Disease	208	34	29 - 46	195	43	31 - 48
Severe Chronic Heart Disease	170	15	18 - 31	145	19	17 - 32
Severe Trauma	14	36	9 - 60	23	9	12 - 46
Gastrointestinal Disease	218	5	1 - 8	250	3	2 - 7
Gynecologic Disease	38	0	0 -100	37	0	0 -100
Low-Risk Heart Disease	523	5	2 - 6	520	6	2 - 7
Musculoskeletal/Skin Conditions	407	3	1 - 6	423	3	1 - 5
Neuropsychiatric/Sensory Disease	290	3	1 - 7	288	2	1 - 6
Urologic Disease	238	0	1 - 5	238	2	0 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	569
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	235
Percent of Physicians Who Are Board Certified Specialists:	87
Interns and Residents:	194
Registered Nurses:	684
Licensed Practical Nurses:	160

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

GEISINGER-WYOMING VALLEY MED CTR

1000 E MTN DRIVE
WILKES BARRE, PA 18711

Medicare Hospital Provider Number: 390270

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,769	10	9 - 13	1,747	10	10 - 14
Cancer	51	35	26 - 55	56	38	26 - 55
Cerebrovascular Accidents	76	24	17 - 37	90	13	18 - 35
Gastrointestinal Catastrophes	14	29	18 - 65	9	11	20 - 69
Infectious Disease	17	24	14 - 56	33	27	16 - 50
Metabolic/Electrolyte Disorders	19	32	11 - 54	27	19	10 - 45
Pulmonary Disease	88	23	16 - 36	69	26	13 - 36
Renal Failure	4	75	8 - 84	3	33	10 - 93
Severe Acute Heart Disease	70	40	26 - 50	90	30	29 - 50
Severe Chronic Heart Disease	97	24	14 - 32	95	24	14 - 33
Severe Trauma	9	44	6 - 68	4	25	1 - 84
Gastrointestinal Disease	160	1	2 - 6	142	1	1 - 7
Gynecologic Disease	15	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	197	2	1 - 6	232	4	1 - 8
Musculoskeletal/Skin Conditions	191	1	0 - 5	161	1	1 - 5
Neuropsychiatric/Sensory Disease	81	1	0 - 13	78	1	0 - 14
Urologic Disease	66	5	0 - 49	66	3	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	230
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	162
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Geisinger

Wyoming Valley Medical Center

October 21, 1988

Medicare No. 39-0270

Health Care Financing Administration
Health Standards & Quality Bureau
Meadows East Builiding, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

Attn.: Ms. Sandra Kappert

Dear Ms. Kappert:

We have analyzed the mortality data for calendar 1987 submitted by the Health Care Financing Administration for the Geisinger Wyoming Valley Medical Center on the attachment enclosed.

We appreciate the opportunity to review this information before it is made public in December.

Sincerely,

Conrad W. Schintz

Conrad W. Schintz
Senior Vice-President

CWS:cmp

Enclosure

cc: Dr. S. Heydt

1000 East Mountain Drive
Wilkes-Barre, PA 18711
(717) 826-7300

COMMENTS ON HCFA MORTALITY DATA
GEISINGER WYOMING VALLEY MEDICAL CENTER
WILKES-BARRE, PENNSYLVANIA 18711

Data Verification

The following discrepancies have been found in our 1987 mortality data.

A. Two medical record numbers were incorrect. [redacted] was mistakenly documented as [redacted] and [redacted] was mistakenly documented as [redacted]

B. The date of death was incorrect for [redacted] The report documented the date of death as [redacted] and the patient was actually discharged by death on [redacted]

Interpretive Remarks

The inability to factor individual severity makes the resulting data unusable for purposes of comparison.

Unique Services

As a community hospital our hospital treats a high percentage of patients admitted directly from nursing homes.

Results of Preliminary Review

Results indicate that for all 17 diagnostic categories outlined, we fall within the HCFA predicted range. However, it is emphasized that HCFA data is not in itself a measure of hospital performance.

GERMANTOWN HOSPITAL MED CENTER

ONE PENN BOULEVARD
PHILADELPHIA, PA 19144

Medicare Hospital Provider Number: 390088

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,896	14	12 - 16	2,103	14	11 - 16
Cancer	99	37	29 - 53	90	30	28 - 51
Cerebrovascular Accidents	125	22	19 - 35	108	24	18 - 36
Gastrointestinal Catastrophes	23	39	15 - 57	21	48	16 - 60
Infectious Disease	34	35	20 - 55	42	31	21 - 53
Metabolic/Electrolyte Disorders	48	23	15 - 45	51	22	8 - 38
Pulmonary Disease	70	37	16 - 41	103	45	19 - 41
Renal Failure	16	50	10 - 68	14	57	19 - 78
Severe Acute Heart Disease	61	34	28 - 53	65	26	28 - 51
Severe Chronic Heart Disease	135	17	18 - 32	136	21	16 - 32
Severe Trauma	3	33	4 - 86	3	0	6 - 80
Gastrointestinal Disease	104	5	1 - 13	124	6	1 - 12
Gynecologic Disease	10	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	169	3	2 - 8	210	3	2 - 7
Musculoskeletal/Skin Conditions	195	3	1 - 7	211	4	1 - 8
Neuropsychiatric/Sensory Disease	81	4	1 - 14	79	0	0 - 8
Urologic Disease	57	0	0 - 11	49	2	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	234
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	213
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	24
Registered Nurses:	207
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

GNADEN HUETTEN MEM HOSP

11TH HAMILTON STS
LEHIGHTON, PA 18235

Medicare Hospital Provider Number: 390194

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	860	11	7 - 13	756	11	7 - 13
Cancer	8	75	21 - 78	11	82	25 - 72
Cerebrovascular Accidents	29	34	11 - 46	24	46	10 - 49
Gastrointestinal Catastrophes	8	25	10 - 69	5	0	8 - 66
Infectious Disease	10	40	14 - 70	5	20	14 - 81
Metabolic/Electrolyte Disorders	10	50	7 - 65	5	40	4 - 78
Pulmonary Disease	42	21	12 - 39	48	25	12 - 39
Renal Failure	6	67	7 - 78	1	100	1 - 97
Severe Acute Heart Disease	38	29	22 - 52	31	39	22 - 56
Severe Chronic Heart Disease	49	22	12 - 37	54	26	11 - 36
Severe Trauma	0	-	-	1	0	0 - 99
Gastrointestinal Disease	110	2	0 - 9	78	1	1 - 11
Gynecologic Disease	25	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	104	5	0 - 13	93	2	1 - 10
Musculoskeletal/Skin Conditions	76	3	0 - 17	82	1	0 - 12
Neuropsychiatric/Sensory Disease	33	0	0 - 28	38	0	0 - 22
Urologic Disease	67	4	0 - 73	65	0	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	198
Occupancy Rate (%):	78
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	62
Percent of Physicians Who Are Board Certified Specialists:	44
Interns and Residents:	0
Registered Nurses:	91
Licensed Practical Nurses:	34

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

11th & Hamilton Streets
Lehighton, PA 18235
(215) 377-1300

Gnaden Huetten
Memorial Hospital
A HealthEast Hospital

Medicare Provider Number - 390194

October 13, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

Please see attached copy of our corrected hospital specific data representing Medicare mortalities for Gnaden Huetten Memorial Hospital, Lehighton, PA. Also enclosed are our comments on the data generated by HCFA and comments regarding the 1986 AHA hospital survey results.

Sincerely,

Richard E. Hudson

Richard Hudson
President

GENERAL INTERPRETIVE COMMENTS

1. HCFA data still does not measure quality which can only be evaluated through peer review not statistical comparisons.
2. HCFA data is not all-inclusive since only Medicare statistics were used.
3. Not all factors affecting the probability of death in a particular case (severity of illness) are included in the predictive model. A difference between a hospital's actual and expected mortality rate cannot be construed as reflecting high or low quality of care - the difference may result from factors not included in the statistics.
4. The "Other" category is too broad and contains diagnoses which sound like "high risk" entities but do not appear in the 16 diagnosis categories. For example, not all cancer cases are included on the "CA" category. Also, intestinal obstruction, GI hemorrhage, acute pancreatitis sould like "GI catastrophies" but do not appear in that category. All these mentioned examples represent "high risk" situations and should be incorporated as such.
5. Quality of care continues to be of the utmost concern to our hospital's governing board, management and Medical Staff. Corrective action will be taken, when necessary, to ensure a high degree of quality care. A hospital's mortality rate may fluctuate from year to year and for many reasons. Mortality rates therefore should not be used to guide consumer behavior.
6. All of our mortality statistics were within the predicted ranges. For next year's review of 1988 mortalities, we will be able to compare severity of illness (via MedisGroups). Through review of significant cases by our Mortality/Morbidity Committee we will be able to address quality of care issues. Both of these entities will allow us a more complete analysis of our mortalities in the future.
7. Our facility provides acute care services for 3 area SNF's. Care provided in those facilities should be evaluated to reflect impact on mortality.
8. Large majority of our patient population emcompasses people with endstage diseases (CA, cardiopulmonary, renal, liver, etc.) - death being an expected outcome.

1986 AHA SURVEY COMMENTS

The total number of beds reflected by the 1986 survey (78) does not include our specialty beds (i.e. OB, Peds, Nursery, MHU, ICCU). We also have a combined CCU and ICU which is not indicated under the specialty services. Since 1986, Gnaden Huetten Memorial Hospital has undergone renovations and our bed capacity has changed.

Most current breakdown:

122 beds - includes 76 med/surg adults
6 OB
5 Peds
6 ICCU
22 MHU
7 Bassinets

Occupancy rate - 68.4%
Total number of physicians - 61

GOOD SAMARITAN HOSP

E NORWEGIAN TREMONT STS
POTTSVILLE, PA 17901

Medicare Hospital Provider Number: 390031

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,178	12	10 - 14	2,259	13	10 - 15
Cancer	44	43	26 - 58	76	42	28 - 54
Cerebrovascular Accidents	73	30	17 - 39	97	30	19 - 39
Gastrointestinal Catastrophes	13	23	18 - 65	26	23	21 - 57
Infectious Disease	33	42	19 - 55	32	25	19 - 53
Metabolic/Electrolyte Disorders	39	46	14 - 49	25	36	14 - 54
Pulmonary Disease	94	30	17 - 38	95	35	17 - 39
Renal Failure	15	47	22 - 79	7	29	16 - 83
Severe Acute Heart Disease	83	33	25 - 47	93	39	27 - 49
Severe Chronic Heart Disease	163	25	17 - 32	180	29	15 - 30
Severe Trauma	3	0	4 - 79	0	-	-
Gastrointestinal Disease	189	3	2 - 8	197	4	1 - 8
Gynecologic Disease	19	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	398	3	2 - 6	387	3	2 - 6
Musculoskeletal/Skin Conditions	143	3	2 - 9	195	3	1 - 7
Neuropsychiatric/Sensory Disease	55	2	0 - 16	65	3	1 - 15
Urologic Disease	105	3	0 - 14	84	0	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 201
Occupancy Rate (%): 84
Ownership/Control: Church

STAFFING

Total Number of Physicians: 90
Percent of Physicians Who Are Board Certified Specialists: 60
Interns and Residents: 0
Registered Nurses: 133
Licensed Practical Nurses: 46

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

GS†H Good Samaritan Hospital
Pottsville, Pennsylvania 17901 (717) 621-4000

Medicare Provider #390031

October 19, 1988

William L. Roper, M.D., Administration
Health Care Financing Administration
Health Standards and Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, MD 21207

Dear Dr. Roper:

I would like to take this opportunity to comment on the HCFA mortality data. The statistics indicate 2,178 Medicare patients were treated at Good Samaritan Hospital during 1987. Our records demonstrate 3,368 Medicare patients were discharged during 1987. Presumably, the discrepancy reflects multiple admissions of individual beneficiaries in which only the most recent admission has been included in the HCFA statistics. Of the total number of deaths within 30 days of discharge from our hospital, 19% died sometime after discharge from Good Samaritan Hospital. These deaths were included in our statistics although realistically they may have died for other reasons than what they were treated for while patients at our facility.

Good Samaritan Hospital is within the predicted range of mortality for every diagnostic category. An intense quality review of the deceased patients' medical records was performed by our Quality Assessment staff in the diagnostic categories of infectious disease, metabolic/electrolyte disturbances and renal failure. After review it was determined that, in most cases, these patients died of chronic diseases such as end-stage heart disease and cancer. The average age of these patients was 80 years old The reason these patients fell into these particular diagnostic categories does not necessarily denote this disease as the cause of death. Rather, it indicates why the patient was admitted to the hospital on this particular occasion even though they succumbed to their chronic ailments.

The HCFA statistics have demonstrated that Good Samaritan Hospital continues to provide quality care to its elderly patients.

Sincerely,

Frederick J. Siembieda
President/Chief Executive Officer

FJS:kab

GOOD SAMARITAN HOSPITAL

FOURTH WALNUT STREETS
LEBANON, PA 17042

Medicare Hospital Provider Number: 390066

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,097	13	10 - 14	2,140	14	11 - 15
Cancer	81	44	28 - 53	98	51	33 - 57
Cerebrovascular Accidents	94	21	16 - 34	114	20	20 - 37
Gastrointestinal Catastrophes	21	62	19 - 62	15	20	15 - 59
Infectious Disease	41	34	19 - 51	30	33	18 - 55
Metabolic/Electrolyte Disorders	24	21	8 - 46	29	17	12 - 45
Pulmonary Disease	69	32	15 - 39	67	30	12 - 37
Renal Failure	4	50	4 - 84	8	38	19 - 86
Severe Acute Heart Disease	91	43	29 - 52	117	38	29 - 49
Severe Chronic Heart Disease	123	24	14 - 31	122	30	16 - 34
Severe Trauma	1	0	1 - 97	3	0	7 - 81
Gastrointestinal Disease	176	7	1 - 11	192	5	1 - 9
Gynecologic Disease	28	0	0 -100	28	0	0 - 95
Low-Risk Heart Disease	274	2	2 - 6	239	3	1 - 7
Musculoskeletal/Skin Conditions	173	3	1 - 8	163	2	1 - 7
Neuropsychiatric/Sensory Disease	51	2	1 - 16	59	7	0 - 27
Urologic Disease	104	4	0 - 17	107	1	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	164
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	92
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	164
Licensed Practical Nurses:	67

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GRADUATE HOSP

ONE GRADUATE PLAZA
PHILADELPHIA, PA 19146

Medicare Hospital Provider Number: 390170

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,398	12	9 - 14	2,406	11	10 - 14
Cancer	92	34	31 - 55	102	46	32 - 56
Cerebrovascular Accidents	58	16	16 - 36	73	29	15 - 37
Gastrointestinal Catastrophes	22	32	18 - 59	29	34	18 - 55
Infectious Disease	22	32	18 - 58	26	31	16 - 54
Metabolic/Electrolyte Disorders	33	12	14 - 43	46	22	12 - 41
Pulmonary Disease	79	19	16 - 36	75	31	15 - 39
Renal Failure	11	18	8 - 66	10	10	11 - 68
Severe Acute Heart Disease	111	38	27 - 47	109	34	29 - 49
Severe Chronic Heart Disease	94	24	13 - 32	111	17	16 - 32
Severe Trauma	5	40	4 - 78	11	27	5 - 61
Gastrointestinal Disease	133	5	1 - 11	130	2	1 - 8
Gynecologic Disease	14	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	527	7	2 - 7	503	5	2 - 6
Musculoskeletal/Skin Conditions	184	2	1 - 6	192	3	0 - 8
Neuropsychiatric/Sensory Disease	91	3	0 - 14	82	2	0 - 17
Urologic Disease	64	0	0 - 14	68	1	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	320
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	329
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	103
Registered Nurses:	388
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

THE GRADUATE HOSPITAL
ONE GRADUATE PLAZA • PHILADELPHIA, PA. 19146 • (215) 893-2000

GERALD E PIERSON
EXECUTIVE DIRECTOR

October 20, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

Patient outcomes in tertiary health care are largely shaped by the volume and acuity of the institution's referral and transfer base. As a major referral center in the Delaware Valley, Graduate Hospital is pleased to note that all of the Health Care Financing Administration reported mortality rates for 1987 fall within the predicted ranges.

We support and encourage the continued refinement of H.C.F.A.'s statistical analysis and reporting processes to reflect more than simply mortality. Mortality is not a finite indicator of patient care quality because of all of the various other factors and causes that go into the death of a patient. The internal generic screening and quality monitoring programs in place at The Graduate Hospital assure our patients of our continued vigilance and concern with the provision of high quality care.

We welcome the public to make inquiries into the care they are receiving and support efforts to make quality of care information available, comprehensible, and of reliable, interpretable quality. Thank you for the data provided, it will be added to our ongoing quality assurance files.

Sincerely,

Gerald E Pierson

GP/caa

GRAND VIEW HOSP

LAWN AVE
SELLERSVILLE, PA 18960

Medicare Hospital Provider Number: 390057

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,911	10	11 - 15	1,897	11	12 - 16
Cancer	40	45	26 - 59	60	52	32 - 60
Cerebrovascular Accidents	72	18	17 - 37	75	23	20 - 40
Gastrointestinal Catastrophes	20	25	18 - 58	14	36	15 - 64
Infectious Disease	21	33	18 - 59	30	43	23 - 61
Metabolic/Electrolyte Disorders	34	29	17 - 52	54	24	19 - 48
Pulmonary Disease	123	16	17 - 33	80	20	19 - 40
Renal Failure	5	60	11 - 85	6	33	11 - 81
Severe Acute Heart Disease	95	29	32 - 52	99	29	31 - 51
Severe Chronic Heart Disease	106	20	17 - 34	107	23	15 - 33
Severe Trauma	3	67	5 - 86	2	0	2 - 89
Gastrointestinal Disease	135	4	1 - 10	119	5	1 - 12
Gynecologic Disease	15	7	0 -100	19	0	0 -100
Low-Risk Heart Disease	299	4	2 - 7	265	2	2 - 6
Musculoskeletal/Skin Conditions	177	1	1 - 6	173	2	1 - 7
Neuropsychiatric/Sensory Disease	55	4	0 - 24	72	1	1 - 11
Urologic Disease	79	3	0 - 14	67	4	0 - 29

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	250
Occupancy Rate (%):	68
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	136
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	0
Registered Nurses:	284
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Grand View Hospital
700 Lawn Avenue • Sellersville, PA 18960 • 215/257-3611

October 20, 1988

William Roper, M.D.
Administrator
H.C.F.A.
Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Re: MEDICARE PROVIDER #390057

Dear Dr. Roper:

This letter is in response to the HCFA Mortality Report which was submitted to Grand View Hospital for comment on Medicare patients who died within 30 days of their last admission during 1987. Our reply contains corrections and comments and expresses a deep concern that your published report may be misinterpreted or misused.

Corrections:

1. Grand View Hospital has 225 acute care beds and 20 skilled care beds. You have listed our bed capacity as 149.
2. Grand View Hospital has a hospice program. You indicated that it does not. Additionally, it has a Coronary Care Unit. You indicated that it does not.
3. Two (2) of the patients that you listed as having died of Severe Chronic Heart Disease had their final admissions in 1988, not 1987 and should not have been included in your figures.
4. Two (2) of the patients that you listed as having died of Low Risk Heart Disease also had their final admissions in 1988 not 1987. One other patient was admitted from 8/27/87 to 9/1/87, not 7/13/87 to 7/21/87 as you had listed.
5. In the category "All Other Diseases:" one (1) patient of the forty-five (45) is still living and five (5) patients had their final admission in 1988 not 1987 and therefore should be omitted from the total presented to us.
6. To summarize, we have compared your data with ours and made the corrections you invited us to make.

Comments on Data:

1. Cancer Category: 14 of the 18 deaths (77%) occurred in patients who were 70 years of age or older. Seven (7) of the 18 (38.8%) were referred from our Hospice for terminal care.

2. CVA Category: 12 of the 13 deaths (92.3%) involved patients who were 70 years of age or older.

3. Pulmonary Disease: 21 of 22 deaths (95.4%) were 70 years of age or older.

4. Severe Acute Heart Disease: 26 out of 28 (92.8%) were 70 years of age or older.

5. Severe Chronic Heart Disease: 17 out of 21 deaths (80.9%) were 70 years of age or older. None of these patients died in the Hospital.

6. Gastrointestinal Disease: 6 out of 6 (100%) were 70 years or older.

7. Low Risk Heart Disease: 9 out of 9 (100%) were 70 years of age or older.

8. All Other Diseases: 37 out of 45 (82.2%) were 70 years of age or older.

9. All Cases:

   Listed below is a summarized comparison of the HCFA Mortality Data to that which was gathered through our own statistical review:

Calculations By	Total Number	Average Mortality Rate
HCFA	1,911	10%
Grand View Hospital	1,902	11%

10. Let me express great concern that mortality statistics alone do not reflect the quality of care provided by a hospital. Your presentation has begun to address co-morbidities and severity of illness upon admission, but it omits many other key factors that can affect mortality.

Sincerely yours,

Amory M Sommaripa, M.D.
emb

Amory M. Sommaripa, M.D.
Medical Director

AMS:emb

GREENE COUNTY MEMORIAL HOSPITAL

SEVENTH BONAR STREETS
WAYNESBURG, PA 15370

Medicare Hospital Provider Number: 390150

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	942	15	11 - 17	869	14	12 - 18
Cancer	14	50	18 - 68	17	71	30 - 73
Cerebrovascular Accidents	42	43	13 - 44	31	32	19 - 52
Gastrointestinal Catastrophes	5	20	7 - 75	2	100	2 - 89
Infectious Disease	22	41	21 - 63	11	45	15 - 69
Metabolic/Electrolyte Disorders	23	30	14 - 54	32	22	14 - 47
Pulmonary Disease	77	29	20 - 42	76	25	18 - 40
Renal Failure	1	100	3 - 98	2	50	4 - 93
Severe Acute Heart Disease	51	37	23 - 51	56	46	28 - 55
Severe Chronic Heart Disease	59	31	16 - 41	61	18	16 - 37
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	63	0	1 - 9	49	2	1 - 15
Gynecologic Disease	13	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	164	4	1 - 9	116	3	1 - 9
Musculoskeletal/Skin Conditions	41	2	0 - 23	58	3	0 - 20
Neuropsychiatric/Sensory Disease	12	0	0 - 97	12	0	0 -100
Urologic Disease	55	4	0 - 33	44	7	0 - 46

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	68
Occupancy Rate (%):	77
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	26
Percent of Physicians Who Are Board Certified Specialists:	54
Interns and Residents:	0
Registered Nurses:	77
Licensed Practical Nurses:	28

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GREENE COUNTY MEMORIAL HOSPITAL
WAYNESBURG, PENNSYLVANIA 15370
412-627-3101

October 24, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Attention: Mrs. Sandra Cappert
2-D-2 Meadows East Bldg.
6325 Security Blvd.
Baltimore, MD 21207

RE: 1987 Mortality Data

Dear Mrs. Cappert:

This correspondence is written on behalf of the Greene County Memorial Hospital located in Waynesburg, Pennsylvania relative to the 1987 Medicare Hospital Mortality Information report. It should be noted that this letter further supplements the concerns of our hospital, which were noted in our correspondence to you dated October 19, 1987 relative to the 1986 mortality information.

I would reiterate the concern of the hospital with regard to this type of reporting. It is a statistical attempt at establishing an expected or predictable mortality range of "x" disease. It must be recognized that any range established is based upon the variables included within the measurement and how they are measured. This type of information does not take into account the quality of care being provided by the respective facility; the severity of patient illness; nor the nature of services which are available. The effectiveness and the ability of the statistical model to detect differences in quality and the appropriateness of care has never been evaluated to our knowledge.

I would point out the following few observations of our hospital staff relative to the 1987 report:

- The statistics include patients who died within thirty (30) days of admission, whether they died in the hospital or not.
- The data is misleading in that the fewer number of cases in a diagnostic categorty, the greater the uncertainty of the expected range and the wider the range will result.
- The statistics concerning the characteristics of the hospital are absolutely incorrect, both in bed size and percentage of occupancy.
- The data does not take into account transfers from nursing homes, home health, or the patient's general health status upon admission.

To: Mrs. Cappert
From: Mr. Mariner
10/24/88
Page 2

- There has been a limited number of patient characteristics considered in the development of the model. For example:
    - Are all comorbidities measured in the statistical model?
    - Is it not true that certain hospitals attract certain populations due to location?
    - Is is not true that certain hospitals attract certain populations due to expertise in a particular field?, i.e., cancer units, trauma units, etc.
- The statistics do not take into account "Do Not Resuscitate" and "No CPR" orders for terminally ill patients.

In summary, we believe that this type of data can lead to misconceptions, misrepresentations, and certainly misunderstandings if taken out of context or if it is conveyed in a purely statistical model. Quality of care has remained paramount at our facility for over eighty-one (81) years. We believe that we have done a superb job in this area over this span of time and are committed to its continuance in the future. The establishment of a "predicted" mortality rate for our type of facility is very unfair due to the large number of variables involved. Once the data base is more firmly established, it will become much more evident that it is a very unreliable and unstable source of information.

I appreciate the opportunity of submitting comments relative to this report. I feel that it is important that we be able to communicate our concerns to you and that hopefully it will have some impact as additional models and measuring devices are developed in the future.

Very truly yours,

GREENE COUNTY MEMORIAL HOSPITAL

Steven A. Mariner
Acting Administrator

SAM/jct

cc: Harry J. Cancelmi, Jr., President, Board of Trustees
Bernard Imrich, M.D., President, Medical Staff
George L. Muir, Assistant Administrator/Fiscal Services
Helen Litman, R.N., Assistant Administrator
Judith Adler-McNutt, Director, Medical Records

GREENVILLE HOSP

110 N MAIN ST
GREENVILLE, PA 16125

Medicare Hospital Provider Number: 390178

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,115	8	7 - 11	2,270	8	7 - 11
Cancer	48	56	26 - 57	52	54	31 - 61
Cerebrovascular Accidents	56	21	15 - 38	65	35	18 - 43
Gastrointestinal Catastrophes	12	50	12 - 66	11	36	22 - 76
Infectious Disease	17	12	24 - 60	6	33	15 - 81
Metabolic/Electrolyte Disorders	32	25	12 - 47	13	15	7 - 53
Pulmonary Disease	76	25	17 - 39	71	14	16 - 35
Renal Failure	4	50	5 - 84	7	43	16 - 85
Severe Acute Heart Disease	72	38	28 - 52	75	37	28 - 51
Severe Chronic Heart Disease	90	18	14 - 32	92	18	17 - 35
Severe Trauma	2	0	2 - 89	0	-	-
Gastrointestinal Disease	91	2	1 - 11	143	2	1 - 8
Gynecologic Disease	12	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	199	1	2 - 5	204	1	2 - 6
Musculoskeletal/Skin Conditions	648	1	1 - 4	679	1	1 - 4
Neuropsychiatric/Sensory Disease	42	7	0 - 49	74	0	0 - 8
Urologic Disease	91	1	0 - 10	72	1	0 - 23

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	226
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	61
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	0
Registered Nurses:	209
Licensed Practical Nurses:	47

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Greenville
Regional Hospital

110 North Main Street
Greenville, Pennsylvania 16125-1795
(412) 588-2100

J. William Eddy
President

October 21, 1988

Health Standards & Quality Bureau
Health Care Financing Administration
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: GREENVILLE REGIONAL HOSPITAL
MEDICARE ID#390178

Dear Mrs. Kappert:

We appreciate this opportunity to comment on the 1987 Medicare Hospital Mortality Information concerning Greenville Regional Hospital.

Statistical Information

Actual mortality rates for both 1986 and 1987 were within or below the predicted mortality range for all seventeen diagnostic categories.

We would re-emphasize the points made last year that (1) mortality data alone is not a complete measure of the quality of care at an individual hospital, and (2) there is some question regarding its use as a valid measure of quality care. In general, quality is related to the appropriateness of care provided, consistent with the standards of good medical practice, given the patient's needs and reflective of the patient's desires. As yet, there is no single index of quality measurement either through the government or through hospital-based systems.

During the past year, Greenville Regional Hospital opened a specialized unit for the care of oncology (cancer) patients. The nursing staff in this unit works exclusively with cancer patients. We feel the specialized services and attention provided to patients in this unit have enhanced the quality of their care. Although the Hospital fell within the predicted mortality ranges for cancer-related diagnoses during both years, a statistical measure such as the Medicare Mortality Information does not consider the severity of illnesses treated in the new unit, the upgraded level of care cancer patients are now

Mrs. Sandra Kappert
Health Care Financing Administration
October 21, 1988

receiving nor the volume of cancer patients itself. In fact, some readers might falsely interpret that there was a reduction in the number of cancer cases treated between 1986 and 1987 because they would be looking at Medicare inpatient volumes alone.

Hospital Characteristics

Initially, we were concerned with errors in the reporting and manipulation of this data by HCFA. It is our understanding, however, that the data released by HCFA will be taken directly from the 1987 AHA survey with no further manipulation by HCFA. We feel this will be a positive step by HCFA to report more accurate information.

We would like to comment, however, on the availability of hospice care. Although the information reported by HCFA will indicate that there is no inpatient hospice unit at Greenville Regional Hospital we would like to point out that the Hospital has successfully offered a home-care based hospice program for several years that is accredited by the Joint Commission on Accreditation of Health Care Organizations. Readers who are not familiar with this fact might falsely interpret this data to mean that the Hospital does not have a formalized program to meet the needs of terminally ill patients and their families. We feel that future versions of this data should report whether there is a formal hospice program - regardless if it is inpatient or outpatient in nature.

We would also point out that, although the Hospital does not have dedicated shock/trauma and burn units, we are able to routinely care for these types of patients and need to transfer very few of them to metropolitan trauma centers.

Likewise, it is important to note that Greenville Regional Hospital has two intensive care units. One is a surgical ICU. The other is a medical ICU which cares for coronary care patients as well as other critically ill medical patients.

Thank you for this opportunity to comment.

Sincerely,

J. William Eddy

JWE/cje

HAHNEMANN UNIVERSITY HOSP

230 N BROAD ST
PHILADELPHIA, PA 19102

Medicare Hospital Provider Number: 390051

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,545	11	11 - 15	2,561	13	12 - 16
Cancer	101	38	35 - 58	111	40	38 - 61
Cerebrovascular Accidents	61	21	16 - 38	40	20	15 - 41
Gastrointestinal Catastrophes	16	31	10 - 57	22	32	20 - 61
Infectious Disease	31	32	21 - 57	30	57	25 - 62
Metabolic/Electrolyte Disorders	41	24	19 - 51	51	29	20 - 50
Pulmonary Disease	53	28	18 - 44	73	26	20 - 43
Renal Failure	31	19	10 - 58	40	13	8 - 56
Severe Acute Heart Disease	108	31	27 - 47	93	37	28 - 50
Severe Chronic Heart Disease	103	17	17 - 33	113	15	17 - 33
Severe Trauma	5	0	5 - 65	6	50	4 - 75
Gastrointestinal Disease	90	9	1 - 17	93	8	2 - 15
Gynecologic Disease	1	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	617	5	3 - 7	478	7	3 - 8
Musculoskeletal/Skin Conditions	174	2	1 - 7	208	3	1 - 7
Neuropsychiatric/Sensory Disease	85	2	1 - 11	75	7	0 - 22
Urologic Disease	50	0	0 - 14	75	1	1 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	552
Occupancy Rate (%):	78
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	658
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	312
Registered Nurses:	546
Licensed Practical Nurses:	34

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

HU
Hahnemann University Hospital

Samuel H. Steinberg, FACHE
Chief Executive Officer

215 448 4550

Broad & Vine
Philadelphia, PA
19102-1192

Mail Stop 300

October 20, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services

Provider #390051

Dear Dr. Roper:

Hahnemann University Hospital is a 616-bed acute care facility located in Center City Philadelphia. We are a major referral center for many specialities, most notably cardiology, oncology, and trauma. We treat many patients with significant medical and surgical illnesses as evidenced by our case mix index, which is the second highest in the state of Pennsylvania. This index is a general measure indicative of the severity of illness of Medicare patients.

As a hospital accredited by the Joint Commission on Accreditation of Healthcare Organizations, Hahnemann and its governing body, management, and medical staff retain the utmost concern for the quality of care provided to our patients. We have in place an ongoing program that monitors and evaluates all aspects of patient care. The cornerstone of our program is the peer review activity performed by our medical staff. Mortality review is an important aspect of our program and one of the many methodologies used to focus peer review activities, all of which are geared toward the identification of opportunities to improve care.

Mortality data, by itself, does not measure quality. A mortality rate higher than predicted does not confirm the existence of quality problems, just as a mortality rate lower than predicted does not establish that a hospital provides high quality care. The model used by HCFA has not been tested and validated sufficiently to be a proven predictor of patient mortality. This model assumes that all patients are "average," and several important factors such as severity of illness, socioeconomic status, or the presence of a terminal illness were not considered.

Although Hahnemann University Hospital was within the predicted mortality ranges in all of the published categories, and in fact shows a reduction in many categories from last year, this data is only able to provide very simplistic statistical comparisons. The quality of care can only be determined through extensive study performed by qualified practitioners. Through our ongoing monitoring activities, acquistion of state-of-the-art equipment, and continual upgrading and expansion of our facility, we strive everyday to provide the best care possible to each of our patients.

We would like to thank HCFA for the opportunity to comment on the release of Medicare mortality data for 1987.

Sincerely,

Samuel H. Steinberg
Chief Executive Officer

HAMOT MEDICAL CTR

201 STATE ST
ERIE, PA 16550

Medicare Hospital Provider Number: 390063

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,412	10	9 - 13	3,341	10	9 - 13
Cancer	136	28	28 - 48	138	38	29 - 50
Cerebrovascular Accidents	109	25	18 - 36	111	21	18 - 35
Gastrointestinal Catastrophes	28	32	19 - 57	25	20	13 - 50
Infectious Disease	22	45	16 - 58	27	22	14 - 49
Metabolic/Electrolyte Disorders	55	18	14 - 41	36	8	12 - 38
Pulmonary Disease	87	28	20 - 41	92	27	18 - 39
Renal Failure	10	30	11 - 73	7	43	11 - 80
Severe Acute Heart Disease	137	45	28 - 47	109	46	29 - 50
Severe Chronic Heart Disease	160	17	16 - 30	167	22	17 - 31
Severe Trauma	5	0	5 - 65	6	0	6 - 60
Gastrointestinal Disease	168	4	1 - 9	178	2	1 - 7
Gynecologic Disease	27	0	0 - 38	18	0	0 -100
Low-Risk Heart Disease	713	6	2 - 6	619	4	2 - 6
Musculoskeletal/Skin Conditions	360	1	1 - 4	351	2	1 - 5
Neuropsychiatric/Sensory Disease	86	2	0 - 16	105	4	0 - 15
Urologic Disease	119	1	1 - 7	147	3	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	485
Occupancy Rate (%):	67
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	207
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	35
Registered Nurses:	548
Licensed Practical Nurses:	107

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Hamot

Hamot Medical Center
201 State Street
Erie, PA 16550-0001
814/870-6000

October 17, 1988

Health Standards and Quality Bureau
Health Care Financing Administration
Attention: Mrs. Sandra Kappert
2-D-2 Security Boulevard
Baltimore, Maryland 21207

Re: Medicare Provider #390063

Dear Sir/Madam:

We would like to acknowledge the Department's efforts to make the diagnostic categories more risk homogenous, and would greatly support your continued efforts to develop measures to deal with the complex issues of severity of illness.

The Hospital Characteristic Data should be corrected to read as follows:

Survey and Year: AHA 1986

Beds (#):	536
Occupancy Rate (%):	72
Ownership/Control:	Private, Non Profit
Staffing:	
Total Number of Physicians:	324
Percent of Physicians who are Board Certified Specialists:	78
Interns and Residents per Bed:	.06
Registered Nurses per Bed:	.90
Licensed practical nurses per Bed:	.22
Specialty Services:	
Shock/Trauma or Burn Unit:	YES
Coronary Care Unit:	YES
Organ Transplant Service:	NO
Hospice Care:	NO

The remainder of the data appears accurate based upon the samples verified. We would note that the mortality rate for both categories of heart disease approach the upper limits of the range in both 1986 and 1987. This pattern, and our internal chart review, support our belief that Hamot serves as a tertiary referral center particularly for heart disease patients; and that therefore, the patients in these categories at Hamot are more complex and severely ill than the predicted average.

Sincerely,

Dana R. Lundquist
President

RGT/trg

HANOVER GENERAL HOSP

300 HIGHLAND AVE
HANOVER, PA 17331

Medicare Hospital Provider Number: 390233

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,423	12	10 - 15	1,440	11	11 - 15
Cancer	52	44	27 - 57	39	46	30 - 63
Cerebrovascular Accidents	75	20	16 - 36	77	31	19 - 41
Gastrointestinal Catastrophes	8	13	13 - 66	11	27	13 - 65
Infectious Disease	7	29	9 - 71	6	33	6 - 74
Metabolic/Electrolyte Disorders	11	18	13 - 61	15	20	7 - 52
Pulmonary Disease	50	34	13 - 41	62	29	14 - 39
Renal Failure	2	50	1 - 93	5	40	10 - 85
Severe Acute Heart Disease	106	37	28 - 48	110	34	30 - 50
Severe Chronic Heart Disease	113	15	15 - 30	97	19	14 - 31
Severe Trauma	1	0	0 - 98	2	0	2 - 89
Gastrointestinal Disease	86	3	1 - 12	75	4	0 - 17
Gynecologic Disease	17	0	0 -100	18	0	0 -100
Low-Risk Heart Disease	159	3	1 - 8	190	3	2 - 7
Musculoskeletal/Skin Conditions	122	2	1 - 9	122	2	1 - 9
Neuropsychiatric/Sensory Disease	34	6	0 - 39	37	0	0 - 24
Urologic Disease	90	0	0 - 9	92	0	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	195
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	63
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	0
Registered Nurses:	120
Licensed Practical Nurses:	59

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Hanover
GENERAL HOSPITAL

October 20, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, MD 21207

Attn: Sandra Kappert

Dear Ms. Kappert:

While having no specific criticisms of the data for Hanover General Hospital released by HCFA, I wish to reiterate my comments of last year. I believe that the data is too general to be of any real use to the public. In our case, the ranges of expected mortality for several diagnoses are so wide as to be essentially meaningless. We fall well within expected ranges in all cases and I am happy about that, but I am not persuaded that it is really telling us anything.

I am totally in favor of the public having access to meaningful, useful information on hospital performance and quality. I applaud HCFA's attempt to do this. I hope that you will continue to try to improve the data and process for reporting it. I also hope that a method will be found to provide similar information on physician performance.

Sincerely,

Philip W. Pennington
President

PWP/pk

cc: William F. Goodling

HARRISBURG HOSP

SOUTH FRONT ST
HARRISBURG, PA 17101

Medicare Hospital Provider Number: 390098

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,185	11	9 - 13	3,386	12	11 - 15
Cancer	119	40	27 - 50	138	41	31 - 52
Cerebrovascular Accidents	114	23	18 - 35	122	20	18 - 35
Gastrointestinal Catastrophes	14	57	16 - 66	30	20	18 - 52
Infectious Disease	49	45	22 - 53	40	42	25 - 59
Metabolic/Electrolyte Disorders	51	29	15 - 45	50	30	12 - 43
Pulmonary Disease	125	33	17 - 36	152	20	18 - 35
Renal Failure	7	29	6 - 75	20	65	18 - 72
Severe Acute Heart Disease	113	34	26 - 46	150	33	30 - 47
Severe Chronic Heart Disease	172	19	16 - 30	202	18	16 - 29
Severe Trauma	4	0	8 - 73	8	13	9 - 64
Gastrointestinal Disease	164	3	1 - 8	203	1	1 - 6
Gynecologic Disease	30	0	0 -100	27	0	0 -100
Low-Risk Heart Disease	619	4	2 - 6	562	5	2 - 6
Musculoskeletal/Skin Conditions	261	1	1 - 5	298	2	1 - 6
Neuropsychiatric/Sensory Disease	73	3	1 - 14	62	0	1 - 9
Urologic Disease	118	0	0 - 7	99	3	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	431
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	337
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	36
Registered Nurses:	485
Licensed Practical Nurses:	74

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HARRISBURG HOSPITAL
A CAPITAL HEALTH SYSTEM HOSPITAL
SOUTH FRONT STREET
HARRISBURG PENNSYLVANIA 17101-2099

COMMENTS ON THE HCFA 1987 MORTALITY DATA
Provider 390098

As reported by HCFA, a total of 346 Medicare patients admitted to Harrisburg Hospital died within 30 days of admission. This represents an overall mortality rate of 11%. All of the deaths fell within the Medicare range for predicted mortality within all the diagnostic categories.

Verification of the HCFA data indicated a total of 345 Medicare patients died within 30 days of admission. Of these, 274 died while still a patient in the hospital and 71 died after discharge. (35 patients died in a skilled nursing facility, 35 died at home, and 1 died at another acute care facility.) Two of the patients were reported mistakenly as being patients in Harrisburg Hospital. One death was reported inaccurately. This involved an in hospital death.

Analysis of the data allowing for severity of illness demonstrated an overall average weighted severity of 2.6. (This was accomplished through the application of the Medisgroups Severity of Illness Classification System.) The admissions which resulted in death in the hospital were arranged as follows:

Admission Severity Group	% of Medicare Deaths	Average Age
0	2.4	78.9
1	7.2	73.8
2	26.9	75.3
3	50.7	76.8
4	12.8	77.1

Average overall patient age was 76 years of age.

Review of deaths in severity group 0 and 1 were attributed to chronic conditions and terminal cancer. Of these 32 deaths, 19 were due to chronic medical and cardiac conditions with 8 deaths due to cancer.

Deaths in severity group 2 were due to similar causes. Specifically, a total of 38 deaths were due to cardiac and respiratory related conditions such as acute myocardial infarction, pneumonia, and congestive heart failure; 24 deaths were due to cancer; 14 deaths were due to cerebrovascular and circulatory conditions and 15 deaths were due to gastrointestinal causes and trauma. All of the 90 deaths involved management of multiple medical conditions.

Cases assigned to severity group 3 and 4 demonstrated the high probability and presence of organ failure. As a result, death was an anticipated outcome in each case.

In summary, Harrisburg Hospital performs a comprehensive physician review of all hospital deaths concurrently to assess the quality of patient care. In each instance, no problems were identified. Harrisburg Hospital is committed to the delivery of a high level of patient care to all its patients.

HAVERFORD GENERAL HOSP

2000 OLD WEST CHESTER PIKE
HAVERTOWN, PA 19083

Medicare Hospital Provider Number: 390215

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	856	14	10 - 16	930	16	11 - 17
Cancer	30	43	23 - 59	39	46	26 - 60
Cerebrovascular Accidents	40	25	18 - 46	51	29	17 - 43
Gastrointestinal Catastrophes	5	40	8 - 79	10	50	13 - 70
Infectious Disease	12	58	10 - 63	16	56	14 - 62
Metabolic/Electrolyte Disorders	25	32	12 - 51	22	18	10 - 47
Pulmonary Disease	43	37	17 - 47	50	40	17 - 46
Renal Failure	2	100	3 - 89	2	100	11 - 98
Severe Acute Heart Disease	41	46	26 - 57	40	57	26 - 58
Severe Chronic Heart Disease	49	18	14 - 37	70	29	13 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	56	2	0 - 16	52	0	1 - 11
Gynecologic Disease	5	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	87	5	1 - 14	103	4	1 - 11
Musculoskeletal/Skin Conditions	96	2	0 - 12	87	2	0 - 14
Neuropsychiatric/Sensory Disease	26	0	0 - 90	34	0	0 - 35
Urologic Disease	44	0	0 - 16	50	0	0 - 23

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	103
Occupancy Rate (%):	54
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	260
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	0
Registered Nurses:	76
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HAZLETON GENL HOSP

700 E BROAD ST
HAZLETON, PA 18201

Medicare Hospital Provider Number: 390185

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,443	12	10 - 15	1,436	13	11 - 16
Cancer	32	34	22 - 57	43	40	32 - 63
Cerebrovascular Accidents	73	27	17 - 38	67	36	16 - 40
Gastrointestinal Catastrophes	17	41	14 - 61	14	50	18 - 68
Infectious Disease	12	50	13 - 66	15	53	23 - 72
Metabolic/Electrolyte Disorders	27	26	13 - 50	8	13	3 - 61
Pulmonary Disease	69	22	14 - 36	95	23	13 - 33
Renal Failure	7	29	11 - 78	10	40	5 - 71
Severe Acute Heart Disease	65	38	27 - 52	77	40	26 - 49
Severe Chronic Heart Disease	90	22	13 - 32	97	21	16 - 34
Severe Trauma	6	33	6 - 74	2	50	1 - 93
Gastrointestinal Disease	112	4	1 - 12	115	6	1 - 13
Gynecologic Disease	8	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	206	2	2 - 7	205	3	2 - 7
Musculoskeletal/Skin Conditions	123	4	1 - 11	113	4	0 - 12
Neuropsychiatric/Sensory Disease	31	6	0 - 68	20	0	0 - 30
Urologic Disease	61	3	0 - 35	58	0	1 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	126
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	80
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	114
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HAZLETON ST JOSEPH MED CTR

687 N CHURCH ST
HAZLETON, PA 18201

Medicare Hospital Provider Number: 390054

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,501	12	10 - 15	1,470	11	9 - 14
Cancer	25	40	18 - 57	39	46	29 - 62
Cerebrovascular Accidents	68	24	18 - 39	56	30	15 - 41
Gastrointestinal Catastrophes	15	33	14 - 62	10	20	19 - 70
Infectious Disease	22	50	22 - 64	14	36	17 - 67
Metabolic/Electrolyte Disorders	31	26	13 - 48	29	28	9 - 46
Pulmonary Disease	62	27	16 - 40	74	19	16 - 37
Renal Failure	7	86	12 - 75	8	75	20 - 84
Severe Acute Heart Disease	74	34	28 - 51	57	35	27 - 54
Severe Chronic Heart Disease	92	26	14 - 33	84	20	12 - 31
Severe Trauma	2	50	0 - 96	0	-	-
Gastrointestinal Disease	130	1	1 - 7	145	1	1 - 7
Gynecologic Disease	22	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	204	1	2 - 5	225	3	2 - 7
Musculoskeletal/Skin Conditions	126	5	1 - 12	125	2	1 - 8
Neuropsychiatric/Sensory Disease	27	0	0 - 30	30	0	0 - 44
Urologic Disease	58	3	0 - 30	47	2	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 190
Occupancy Rate (%): 61
Ownership/Control: Church

STAFFING

Total Number of Physicians: 100
Percent of Physicians Who Are Board Certified Specialists: 60
Interns and Residents: 0
Registered Nurses: 75
Licensed Practical Nurses: 46

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

HAZLETON-SAINT JOSEPH MEDICAL CENTER
NORTH CHURCH AND NINTH STREETS
HAZLETON, PENNSYLVANIA 18201

October 19, 1988

Health Standards & Quality Bureau, HCFA
Att: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Att: Mrs. Sandra Kappert:

In reference to the Health Care Financing Administration's Mortality statistics and our hospital's mortality listings - our hospital medicare provider number being 390054, we would like to comment on the report of our hospital.

In reference to the listing of 179 cases reported by HCFA for our hospital, 26 of the patients expired outside of the hospital. Five of the deaths listed outside of the hospital, could not be verified; [redacted]

There was one death that differed from the date reported by HCFA and the Nursing Home:

[redacted] Nursing Home HCFA
Date [redacted] Date [redacted]

Sincerely,

Gerald Andriole, M.D.
Medical Director

HIGHLANDS HOSPITAL AND HEALTH CTR

401 EAST MURPHY AVENUE
CONNELLSVILLE, PA 15425

Medicare Hospital Provider Number: 390184

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	527	15	10 - 17	464	15	9 - 17
Cancer	4	75	18 - 92	5	60	9 - 80
Cerebrovascular Accidents	28	39	12 - 48	19	37	12 - 55
Gastrointestinal Catastrophes	4	0	10 - 74	0	-	-
Infectious Disease	8	38	8 - 70	5	60	4 - 78
Metabolic/Electrolyte Disorders	19	32	12 - 56	23	35	6 - 49
Pulmonary Disease	30	23	13 - 45	41	24	15 - 44
Renal Failure	5	20	10 - 81	4	75	17 - 94
Severe Acute Heart Disease	25	52	19 - 58	16	38	18 - 63
Severe Chronic Heart Disease	35	17	8 - 36	38	24	11 - 39
Severe Trauma	0	-	-	1	0	1 - 97
Gastrointestinal Disease	55	5	0 - 30	38	0	0 - 17
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	72	7	1 - 18	53	2	0 - 18
Musculoskeletal/Skin Conditions	33	0	1 - 16	29	0	0 - 34
Neuropsychiatric/Sensory Disease	14	0	0 - 65	9	0	0 -100
Urologic Disease	22	5	0 - 91	16	0	0 - 48

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	76
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	41
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	0
Registered Nurses:	58
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HOLY REDEEMER HOSP & MED CTR

1648 HUNTINGDON PIKE
MEADOWBROOK, PA 19046

Medicare Hospital Provider Number: 390097

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,694	10	11 - 15	2,850	10	10 - 15
Cancer	109	33	30 - 52	103	46	33 - 57
Cerebrovascular Accidents	172	23	20 - 35	123	24	20 - 37
Gastrointestinal Catastrophes	25	28	21 - 59	42	26	24 - 56
Infectious Disease	56	29	22 - 50	52	33	24 - 54
Metabolic/Electrolyte Disorders	38	24	16 - 48	58	14	10 - 36
Pulmonary Disease	132	22	20 - 38	147	26	17 - 35
Renal Failure	9	33	11 - 75	8	25	14 - 79
Severe Acute Heart Disease	97	29	31 - 51	76	29	28 - 51
Severe Chronic Heart Disease	153	12	18 - 31	185	19	17 - 31
Severe Trauma	7	0	8 - 56	7	29	4 - 70
Gastrointestinal Disease	212	2	2 - 7	227	2	2 - 6
Gynecologic Disease	32	0	0 -100	28	0	0 -100
Low-Risk Heart Disease	346	2	2 - 6	387	3	2 - 6
Musculoskeletal/Skin Conditions	292	2	1 - 6	327	1	1 - 4
Neuropsychiatric/Sensory Disease	63	3	0 - 18	85	1	0 - 10
Urologic Disease	104	1	0 - 10	104	0	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	254
Occupancy Rate (%):	85
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	239
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	342
Licensed Practical Nurses:	85

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Holy Redeemer Hospital and Medical Center

SISTERS OF THE HOLY REDEEMER

John F. Dunleavy, FACHE
President

October 24,1988

Health Standards & Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Medicare Provider #390097

Dear Mrs. Kappert:

In anticipation of HCFA's plan to publish hospital specific mortality data, we have, as requested made an attempt to validate the data forwarded to us on September 15, 1988.

Unfortunately, we have only partially completed this process. To date we have verified ten of the seventeen pages of patient's recorded on the 1987 Discharges From Holy Redeemer Hospital & Medical Center Eligible for MMPS Abstraction. All of the patients recorded on the first ten pages of data are known to the medical staff of Holy Redeemer Hospital & Medical Center. The task of determining whether the patients recorded as having expired within 30 days of discharge from our hospital is one we sought to complete but many of the physicians we contacted were not able to get back to us in sufficient time to meet your deadline for response.

We do wish to correct some of the items recorded under Hospital Characteristics. It is our understanding that the 1987 AHA Survey was to be the data source for this information. You have recorded 1986 AHA data instead. Our 1987 AHA data is as follows:

Beds	170
Occupancy Rate(%)	85
Ownership	church
Staffing:	
Total # of Physicians:	239
Percent of Physicians who are Board Certified Specialists:	76
Interns and Residents/bed	0
Registered Nurses/bed	1.72
Licensed Practical Nurses/bed	0.43

Specialty Services:	
Shock/trauma or burn unit:	No
Coronary Care Unit:	No
Organ Transplant Service:	Yes
Hospice Care:	No

I would appreciate your attention to these changes.

Sincerely yours,

John F. Dunleavy, FACHE
President

HOLY SPIRIT HOSP

N 21ST ST
CAMP HILL, PA 17011

Medicare Hospital Provider Number: 390004

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,985	10	9 - 13	2,958	11	9 - 13
Cancer	113	44	31 - 54	92	46	31 - 56
Cerebrovascular Accidents	102	18	19 - 35	119	25	19 - 36
Gastrointestinal Catastrophes	24	25	17 - 56	16	31	14 - 60
Infectious Disease	50	38	19 - 49	49	37	21 - 53
Metabolic/Electrolyte Disorders	33	24	9 - 44	46	22	9 - 39
Pulmonary Disease	109	22	18 - 37	121	29	15 - 34
Renal Failure	4	0	15 - 82	8	50	13 - 80
Severe Acute Heart Disease	109	34	28 - 49	101	36	28 - 49
Severe Chronic Heart Disease	152	24	15 - 30	151	30	18 - 35
Severe Trauma	4	25	6 - 81	2	0	1 - 91
Gastrointestinal Disease	186	2	1 - 6	191	1	1 - 6
Gynecologic Disease	20	0	0 -100	32	0	0 -100
Low-Risk Heart Disease	337	3	2 - 6	306	3	2 - 6
Musculoskeletal/Skin Conditions	299	1	1 - 5	321	2	1 - 5
Neuropsychiatric/Sensory Disease	193	1	1 - 6	195	1	0 - 6
Urologic Disease	149	3	0 - 16	130	2	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	345
Occupancy Rate (%):	75
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	303
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	259
Licensed Practical Nurses:	70

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

HOLY SPIRIT HOSPITAL

October 19, 1988 Medicare #390004

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

ATTENTION: Sandra Kappert

Dear Mrs. Kappert:

We are providing comments from Holy Spirit Hospital regarding information to be published in the proposed Medicare Hospital Mortality Information (1987), scheduled for release in December of this year.

It is our determination that no quality-of-care concerns exist for the deaths at our hospital to be reported in this publication. All individual deaths are reviewed through our normal peer review/quality assurance review process. In addition, special studies are conducted of Mortality patterns in special diagnostic categories. The data to be published by HCFA has been reviewed and evaluated against these internal studies. All evaluations confirm that the mortality was a result of advanced stage of disease, multiple clinical conditions, or both.

Regarding the HCFA report, we find it to be much better than last year. The inclusion of the medical record number, and a more complete name listing has permitted more accurate verification of the data. The Y-N identification for deaths within 30 days was also helpful in working with the report. It would be more efficient for us if the report listed only deaths, rather than all "last" admissions during the year. Also, it would ease our review of the document if the detailed category listings were in the same category sequence as the summary sheet.

We do have some concerns about the ICD-9-CM codes shown in Table #1. For example, in the Cancer category, codes 150-151 were listed, whereas in the report, codes 151.4 and 151.9 were used to assign patients to this category. We believe the listing should have been more inclusive, showing 150-151.9. The utilization of codes not shown in Table #1 was a frequent occurrence in most categories, and may have caused some inconsistencies in data reporting.

There are some problems with the data detail for our hospital as published in the HCFA document.

Health Care Financing Administration
Mrs. Sandra Kappert
October 19, 1988
Page 2

... The report lists 307 deaths, whereas our internal records show a total of 314 deaths;
... in five (5) cases, the admission shown was not the last admission in the year, so the admission/discharge dates are incorrect;
... in sixteen (16) cases, the date of death is incorrect - in one (1) case the date of death was listed as 8/27, while we have an Emergency admission on 9/2; the other fifteen (15) cases all have a death in the hospital, while a later date is shown in the HCFA report;
... there were at least ten (10) cases of incorrect HIC numbers;
... there were at least seven (7) cases of incorrect medical record numbers;
... there were numerous examples of incorrectly spelled names;
... there were at least five (5) instances in which the wrong principal diagnosis code was used - a more accurate code assignment may have placed these patients in another category, which might change mortality rates; Note: We did notice that most of the errors mentioned above occurred in the category of Chronic Heart Disease, and Other.

We have provided detailed information on some of these errors in Attachment #1, which is not to be published, as it contains specific patient information.

The individual problems listed above do not constitute a large proportion of the cases listed in the HCFA report. The aggregate impact, however, is that there are errors in about 15% of the cases reported. This adds to our concern that the public cannot draw any clear conclusions regarding the quality of hospital services from this mortality information. We believe that any publication of these data should carry strong qualifying statements to prevent data misuse or misinterpretation by those who read it.

Comments on Hospital Characteristics

We understand that an agreement has been reached with the American Hospital Association to completely revise this section. For your information, we are presenting our comments on the data provided in the original HCFA document. These comments are contained in Attachment #2, and do not need to be published.

Thank you for the opportunity to provide both general and detailed commentary on this proposed HCFA information release.

Sincerely,

George E. Ferrey Jr.

George E. Ferrey, Jr.
Director of Planning and
Community Affairs

GEF:hbp

Attachments

HOSP OF HOME FOR JEWISH AGED

5301 OLD YORK ROAD
PHILADELPHIA, PA 19141

Medicare Hospital Provider Number: 390247

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	471	21	15 - 23	478	18	15 - 23
Cancer	2	100	6 - 90	4	50	4 - 82
Cerebrovascular Accidents	20	45	16 - 58	14	7	13 - 47
Gastrointestinal Catastrophes	1	0	1 - 97	4	25	9 - 83
Infectious Disease	8	38	13 - 73	12	50	19 - 72
Metabolic/Electrolyte Disorders	40	38	13 - 47	36	42	13 - 49
Pulmonary Disease	59	31	24 - 49	51	24	23 - 49
Renal Failure	4	75	16 - 93	2	50	5 - 94
Severe Acute Heart Disease	19	47	33 - 76	19	37	28 - 70
Severe Chronic Heart Disease	36	31	18 - 48	30	27	21 - 53
Severe Trauma	0	-	-	4	0	9 - 74
Gastrointestinal Disease	28	4	1 - 25	25	4	2 - 27
Gynecologic Disease	0	-	-	1	0	0 - 98
Low-Risk Heart Disease	51	4	0 - 20	53	4	1 - 16
Musculoskeletal/Skin Conditions	34	3	0 - 28	39	0	1 - 14
Neuropsychiatric/Sensory Disease	15	0	0 - 81	11	18	0 - 82
Urologic Disease	5	0	0 - 93	5	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	56
Occupancy Rate (%):	68
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	35
Percent of Physicians Who Are Board Certified Specialists:	94
Interns and Residents:	4
Registered Nurses:	23
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Philadelphia Geriatric Center

My rainbow...token of the covenant between Me and you...for perpetual generations

5301 Old York Road • Philadelphia, Pennsylvania 19141 • (215) 456-2900

President
William Schwartz
Executive Vice President
Bernard Liebowitz
Vice Presidents
Marjorie A. Abrams
Joseph Abramson
Arnold S. Hoffman
Richard B. Pearl, Esq.
William Perilstein
Carl W. Schneider, Esq.
Ralph S. Snyder, Esq.
Leonard Wasserman
Treasurer
Stanley Merves
Associate Treasurer
Robert H. Silver
Secretary
Jerome B. Muchnick
Associate Secretary
Shirley R. Shils
Medical Director
Joel D. Posner, M.D.
Counsel
Bayard M. Graf, Esq.
Past Presidents
Harry A. Robinson*
David H. Solms
Les Vizak

October 21, 1988

Ms. Sandra Kappert
HCFA Health Standards and Quality Bureau
Meadows East Building - Room 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

Enclosed please find Philadelphia Geriatric Center's analysis of the HCFA mortality information. We would like to sumbit these comments for publication as part of your December mortality analysis publication. For purposes of identification, our Medicare Provider Number is 390247.

Thank you for your cooperation.

Sincerely,

Michael Pietrowicz
Administrator, Hospital Services
MP/vjd

encl.

Chairman of the Board, Charles Hoffman

Board of Directors: Marjorie A. Abrams, Leonard Abramson, Frances C. Bolno, Martin Brait, Howard Brown, Leonard Cantor, Alan E. Casnoff, Esq., Ruth G. Cohn, Louis A. Doull, Bernard Fishman, Louis W. Fryman, Esq., Lewis Gold, Esq., Bennett Goldstein, Stanley Goldstein, Norris S. Harzenstein, Arnold S. Hoffman, Charles Hoffman, Harold E. Kohn, Esq., Joseph C. Kohn, Esq., Martin Kreithen, Esq., Marvin Levin, Bernard Liebowitz, Belle R. Lipschultz, Harry K. Madway, Barry J. Magarick, George Manstein, M.D., Stanley Merves, Jerome B. Muchnick, Ramon R. Obod, Esq., William Perilstein, Joel D. Posner, M.D., Arthur G. Raynes, Esq., Bernard Roth, Robert C. Rudofker, Daniel A. Schmerling, William Schwartz, Gerald S. Segal, Esq., Theodore H. Seidenberg, Fred A. Shabel, Shirley R. Shils, Arthur Shoyer, Robert H. Silver, Ralph S. Snyder, Esq., David H. Solms, Gertrude J. Solomon, Harry Stern, Carol Summers, Edward Taxin, Cary S. Tye, Les Vizak, Don Waldman, Julius Wolfson, David S. Zelitch *(deceased)

HOSPITAL OF THE HOME FOR THE JEWISH AGED

The Hospital of the Home for the Jewish Aged is a 28 bed acute care facility fully accredited by the Joint Commission on Accreditation of Health Care Organizations. The hospital offers a broad spectrum of acute care services including an eight (8) bed geriatric rehabilitation service. Our team of geriatric specialists are committed to the delivery of quality patient care to the frail, elderly community. The average age of our patient base is eighty-five (85) years; ninety-eight percent (98%) of our patients are Medicare beneficiaries.

Analysis of Health Care Financing Administration Statistics

The Hospital of the Home for the Jewish Aged has reviewed the mortality data provided by the Health Care Financing Administration. For a select group of admissions, HCFA's analysis for the Hospital of the Home for the Jewish Aged reported the death of ninety-seven (97) patients out of 471 admissions in 1987. This mortality rate of 20.6% assigned by HCFA is highly inflated and misleading. For 1987, the Hospital of the Home for the Jewish Aged's actual mortality rate for all admissions was 10.9% (99 deaths for 911 admissions). This mortality rate accounts for all admissions in 1987 who died within thirty days of admission.

The information provided below summarizes the characteristics and patient compositions of the ninety-seven (97) deaths identified by HFCA. Analysis of these patients revealed several important factors.

1. Average Age - The average age of the ninety-seven (97) reported patients was eighty-five (85) years old.

2. Source of Admission - Sixty-nine (69) patients (71%) were admitted from nursing homes. Admissions from long term care facilities have a higher degree of severity than patients admitted from the community.

3. Comorbidity - All ninety-seven (97) reported patients exhibited comorbidities; all patients exhibited multiple medical problems.

4. Do Not Resuscitate - Fifty-four (54) deaths that occurred had a Do Not Resuscitate order (DNR) in place. The families of these patients requested that no heroic actions be taken to sustain the life of the patient. Recalculation of HCFA's mortality rate, adjusting for the fifty-four (54) DNR orders, results in a 9.6% rate for the 471 cases.

Conculsion

Health Care Financing Administration's interpretation of our mortality rate is incomplete; it's conculsions are misleading. A complete review of our statistics for 1987 illustrates an 10.9% mortality rate for all admissions; a 4.9% mortality rate excluding patients with written Do Not Resuscitate orders. These rates are truly exceptional considering the characteristics of our patient base as previously outlined. The Hospital of the Home for the Jewish Aged is a nationally recognized leader in the provision of high quality care to the geriatric community.

HOSP OF UNIV OF PENNSYLVANIA

34TH SPRUCE STS
PHILADELPHIA, PA 19104

Medicare Hospital Provider Number: 390111

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,489	8	10 - 13	4,012	8	9 - 13
Cancer	212	26	33 - 51	225	33	33 - 52
Cerebrovascular Accidents	75	20	15 - 35	83	10	17 - 33
Gastrointestinal Catastrophes	27	19	19 - 54	25	32	15 - 55
Infectious Disease	41	49	24 - 58	36	56	20 - 56
Metabolic/Electrolyte Disorders	42	14	13 - 41	38	29	11 - 44
Pulmonary Disease	73	25	18 - 41	85	21	19 - 39
Renal Failure	22	0	4 - 51	43	14	2 - 58
Severe Acute Heart Disease	64	22	28 - 50	71	32	27 - 51
Severe Chronic Heart Disease	93	19	14 - 32	101	16	14 - 30
Severe Trauma	11	0	11 - 48	8	63	6 - 69
Gastrointestinal Disease	158	3	1 - 8	200	1	2 - 6
Gynecologic Disease	31	0	0 - 99	34	0	0 - 90
Low-Risk Heart Disease	463	5	3 - 8	553	5	3 - 7
Musculoskeletal/Skin Conditions	384	1	1 - 5	412	1	1 - 4
Neuropsychiatric/Sensory Disease	102	1	1 - 8	153	3	1 - 8
Urologic Disease	238	1	0 - 6	355	0	1 - 5

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 714
Occupancy Rate (%): 81
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 697
Percent of Physicians Who Are Board Certified Specialists: 91
Interns and Residents: 293
Registered Nurses: 1,124
Licensed Practical Nurses: 23

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: Yes
Hospice Care: No

UNIVERSITY of PENNSYLVANIA MEDICAL CENTER

Hospital of the University of Pennsylvania
3400 Spruce Street
Philadelphia, PA 19104-4283
215-662-2992

C. Edward Schwartz
Executive Director
Hospital of the University
of Pennsylvania
Vice President for Health Services
University of Pennsylvania Medical Center

PROVIDER # 390111

October 21, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Resources
Washington, D.C. 20201

Dear Dr. Roper:

The Hospital of the University of Pennsylvania supports the Health Care Financing Administration's (HCFA) aim to provide the public with valid and accurate information about hospital performance. We also welcome the opportunity to review and comment on the mortality data for our Medicare patients.

Our hospital's actual mortality for all patients and for each of the sixteen diagnostic categories listed falls within or below the predicted range for both 1986 and 1987. We are proud of this excellent performance. Nevertheless, we analyzed the data and assessed the methods used to produce it to determine whether they are valid. This assessment leads us to conclude that the statistical model used to derive the predicted range of mortality has impressive capabilities. We have several suggestions, however, for improving the methodology and making the information even more accurate and useful.

The criterion for inclusion of a particular patient in the mortality statistics is death within 30 days of admission. Apparently, the date of death is provided to HCFA by the Social Security Administration. We checked our own data for the 53 patients that your report indicated involved death after discharge from our hospital. We found that in 9.4% of these cases, the patients actually died in the hospital and the date of death stated in your report was incorrect. These types of errors may not be significant when one considers a national data base of millions of patients. However, even one patient incorrectly categorized can and does change a particular hospital's death rate and its relationship to the predicted range of mortality. Your computer system must therefore have the capability to correct erroneous information and recalculate the hospital's mortality rates.

The model works on the assumption that five characteristics, namely age, gender, transfers, previous hospitalizations and the presence of certain complicating diseases, affect the probability of the patient's death. Although we have no argument with this assumption, we believe that additional factors contribute to mortality in a significant way. Theses factors, which are critical to the outcome of hospital care, include the patient's health status, the severity of his illness on admission to the hospital and his own recuperative resources. The statistical model must therefore include a means of adjusting for the patient's contribution to the outcome of care.

Your current method of generating the data contributes in another way to the variance between a hospital's actual and predicted mortality. The statistical model produces mortality prediction by pooling disease groups into broader diagnostic groups. Since the individual disease groups are not of equal risk for death, a hospital's higher than predicted mortality may have no relationship to its performance but simply reflect a greater-than-average concentration of high risk disease groups. Again, the method of producing these data must incorporate an ability to adjust for a hospital's mix of diagnoses.

In conclusion, we wish to re-state our support of HCFA's efforts to develop performance indicators. We recognize the remarkable progress made by your agency in developing a statistical model which uses existing information to provide useful information about mortality. However, we feel that the current methodology can be improved to provide a more complete measure of a hospital's performance.

The Hospital of the University of Pennsylvania is prepared to work with your agency to develop better methods to derive mortality predictions and to develop other important indicators of quality of care provided by a hospital.

Sincerely,

C. Edward Schwartz
Executive Director

FK/CES:km

HOSPITAL OF THE MED COLL OF PA

3300 HENRY AVE
PHILADELPHIA, PA 19129

Medicare Hospital Provider Number: 390047

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,721	12	11 - 15	1,723	11	10 - 14
Cancer	70	33	31 - 56	77	43	31 - 56
Cerebrovascular Accidents	89	27	17 - 37	64	22	14 - 36
Gastrointestinal Catastrophes	17	47	18 - 65	11	36	10 - 65
Infectious Disease	27	48	23 - 62	20	25	17 - 57
Metabolic/Electrolyte Disorders	30	37	12 - 49	34	26	11 - 46
Pulmonary Disease	69	19	15 - 36	64	20	11 - 34
Renal Failure	7	14	10 - 73	11	36	7 - 70
Severe Acute Heart Disease	85	29	27 - 49	61	38	27 - 53
Severe Chronic Heart Disease	66	9	15 - 31	88	18	16 - 34
Severe Trauma	10	50	5 - 65	11	36	7 - 64
Gastrointestinal Disease	49	0	1 - 11	71	4	0 - 23
Gynecologic Disease	14	0	0 - 99	10	0	0 -100
Low-Risk Heart Disease	255	7	1 - 9	283	5	2 - 8
Musculoskeletal/Skin Conditions	138	4	0 - 12	155	2	1 - 7
Neuropsychiatric/Sensory Disease	53	8	0 - 29	60	2	0 - 14
Urologic Disease	73	4	1 - 15	53	2	1 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	390
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	509
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	259
Registered Nurses:	356
Licensed Practical Nurses:	66

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MCP The Medical College of Pennsylvania
Hospital
(215) 842-6000

Hospital I.D. 390047

October 7, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

RE: Medicare Hospital Mortality Information

The Medical College of Pennsylvania is in receipt of the Medicare Hospital Mortality Information for 1987.

We verified statistics related to the hospital characteristics portion of the report against our copy of the AHA guide. In addition, we confirmed with an AHA representative by telephone the data related to the number of occupied and staffed beds as well as the occupancy rate.

The following revised data is to be included as our comments in the December publication of HCFA mortality:

Beds	393
Occupancy Rate	77.6%
Staffing:	
Total number of physicians	418
Percentage of physicians who are board-certified specialists	79.1%
Interns and residents per bed	.45
Registered nurses per bed	1.27
Licensed practical nurses per bed	.18
Specialty Service:	
Shock/Trauma or burn unit	No
Coronary Care Unit	Yes
Organ Transplant Service	No
Hospice Care	No

We trust these revisions will be incorporated in the final report.

If you have any questions, please contact Marta Silverberg at 215-842-6307.

Sincerely,

William E. Welton
Executive Vice President and
Chief Operating Officer

HOSPITAL PHILA COLLEGE OSTEOPATHIC M

4150 CITY AVE
PHILADELPHIA, PA 19131

Medicare Hospital Provider Number: 390245

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	984	12	10 - 15	1,143	13	11 - 16
Cancer	38	45	24 - 57	51	43	34 - 63
Cerebrovascular Accidents	35	20	12 - 40	32	28	12 - 44
Gastrointestinal Catastrophes	11	27	9 - 62	9	44	7 - 68
Infectious Disease	18	33	15 - 59	33	45	21 - 57
Metabolic/Electrolyte Disorders	11	9	5 - 51	6	0	4 - 59
Pulmonary Disease	49	29	13 - 40	48	48	14 - 44
Renal Failure	15	33	13 - 70	18	39	22 - 78
Severe Acute Heart Disease	30	47	23 - 59	50	34	28 - 56
Severe Chronic Heart Disease	64	16	15 - 34	63	17	12 - 33
Severe Trauma	2	0	0 - 95	2	0	4 - 89
Gastrointestinal Disease	36	6	1 - 27	59	5	0 - 21
Gynecologic Disease	1	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	139	3	1 - 9	160	0	2 - 5
Musculoskeletal/Skin Conditions	98	1	0 - 9	83	4	1 - 14
Neuropsychiatric/Sensory Disease	29	3	0 - 36	44	7	0 - 53
Urologic Disease	46	0	0 - 25	58	2	0 - 35

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	174
Occupancy Rate (%):	63
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	298
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	88
Registered Nurses:	169
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Osteopathic Medical Center of Philadelphia
4150 City Avenue, Philadelphia, Pennsylvania 19131-1696

(215) 581-6262

Jay H. Blackman
Executive Director, Hospital

Osteopathic

October 17, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington, DC 20201

Dear Dr. Roper:

Thank you for the opportunity to comment on the Medicare mortality data.

It is gratifying to note that the Hospital of the Philadelphia College of Osteopathic Medicine statistics fall within range in all categories. HCFA's objectives in publishing this information are clear; nevertheless, important elements of patient care remain untracked. The model does not take into account other factors which can impact the data significantly: namely, the patients' severity of illness, source of admission, patient population, or sociodemographics.

The specific patient mortality data we reviewed did contain errors. There were a number of patients who did not die, but were discharged from the hospital routinely. The hospital characteristics are outdated and inaccurate. Most notably the published occupancy rate and the number of board certified physicians are incorrect. As HCFA plans to update this section prior to publication and without opportunity for verification, this information may continue to be inaccurate.

Again, we thank you for the opportunity to comment.

Sincerely,

Jay H. Blackman
Executive Director

JHB/sab

INDIANA HOSPITAL

HOSPITAL ROAD, BOX 788
INDIANA, PA 15701

Medicare Hospital Provider Number: 390173

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,725	12	10 - 15	1,751	11	10 - 15
Cancer	41	41	31 - 63	28	36	23 - 60
Cerebrovascular Accidents	61	31	18 - 43	79	32	20 - 42
Gastrointestinal Catastrophes	10	20	16 - 67	10	60	11 - 68
Infectious Disease	24	54	24 - 65	23	52	15 - 57
Metabolic/Electrolyte Disorders	19	26	12 - 54	27	22	15 - 51
Pulmonary Disease	95	27	20 - 41	93	30	18 - 39
Renal Failure	10	60	20 - 82	12	50	16 - 77
Severe Acute Heart Disease	70	40	27 - 52	95	28	30 - 51
Severe Chronic Heart Disease	95	22	15 - 33	74	27	15 - 37
Severe Trauma	0	-	-	1	0	0 -100
Gastrointestinal Disease	119	3	1 - 9	153	1	1 - 7
Gynecologic Disease	9	0	0 -100	15	0	0 - 93
Low-Risk Heart Disease	275	3	2 - 7	228	2	2 - 6
Musculoskeletal/Skin Conditions	142	1	1 - 7	140	2	1 - 8
Neuropsychiatric/Sensory Disease	57	4	0 - 22	53	0	1 - 10
Urologic Disease	103	2	0 - 10	101	1	1 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	168
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	59
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	132
Licensed Practical Nurses:	62

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

INDIANA HOSPITAL

A Subsidiary Of
Indiana Healthcare Corporation

Hospital Road, P. O. Box 788
Indiana, Pennsylvania 15701
(412) 357-7000

EXPRESS MAIL

October 21, 1988 Medicare Provider #390173

Health Standards and Quality Bureau - HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

This letter is submitted in response to HCFA's intent to release mortality statistics on hospitals participating in the Medicare program. The following paragraph begins the comments we expect to have appended to the mortality statistics for Indiana Hospital.

Our Administrative Staff has reviewed all data released by the Department of Health and Human Services (HHS) and we have the following general comments:

- Because the relationship of the statistics to quality of care is unknown, interpretation of this data to suggest a measure of hospital performance would be tenuous at best.

- The inclusion of Medicare beneficiaries who die within 30 days after admission to the hospital can distort the mortality data by adding to the statistics those who may have died from causes unrelated to the principle diagnosis.

The following hospital characteristics have been updated to directly correspond with the 1987 AHA survey:

number of staffed beds - 168
number of licensed beds - 194
total number of physicians both active and associate staff - 59
number of board certified physicians - 40
percent of physicians who are board certified - 68

The data was reviewed with the above limitations and updated hospital characteristics in mind. In all instances, Indiana Hospital's mortality rate was well within the acceptable ranges released by HHS and does not indicate a significant variance in any of the areas studied.

Sincerely,

Donald D. Sandoval, FACHE
President and CEO

glz

JAMES C GIUFFRE MED CTR

8TH GIRARD AVE
PHILADELPHIA, PA 19122

Medicare Hospital Provider Number: 390132

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	407	11	9 - 16	440	9	10 - 16
Cancer	5	60	7 - 78	11	64	16 - 70
Cerebrovascular Accidents	21	29	11 - 50	11	27	9 - 60
Gastrointestinal Catastrophes	6	33	11 - 78	5	40	5 - 78
Infectious Disease	5	40	11 - 82	11	18	9 - 58
Metabolic/Electrolyte Disorders	17	12	11 - 49	16	19	7 - 50
Pulmonary Disease	8	25	8 - 66	13	23	12 - 58
Renal Failure	0	-	-	2	0	3 - 89
Severe Acute Heart Disease	24	38	17 - 56	17	29	21 - 64
Severe Chronic Heart Disease	33	9	11 - 34	33	18	12 - 40
Severe Trauma	1	100	3 - 99	1	0	0 - 98
Gastrointestinal Disease	20	5	0 - 70	13	0	0 - 91
Gynecologic Disease	0	-	-	2	0	0 -100
Low-Risk Heart Disease	83	2	1 - 11	86	0	2 - 7
Musculoskeletal/Skin Conditions	23	0	0 - 65	22	0	0 - 57
Neuropsychiatric/Sensory Disease	15	0	0 - 41	36	0	0 - 68
Urologic Disease	10	0	0 -100	6	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	228
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	76
Percent of Physicians Who Are Board Certified Specialists:	84
Interns and Residents:	17
Registered Nurses:	130
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

JAMESON MEM HOSP

WEST LEISURE AVE
NEW CASTLE, PA 16101

Medicare Hospital Provider Number: 390016

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,039	11	10 - 14	2,071	11	10 - 14
Cancer	50	46	29 - 59	53	32	31 - 59
Cerebrovascular Accidents	70	31	17 - 40	58	28	16 - 40
Gastrointestinal Catastrophes	13	54	19 - 70	14	43	14 - 65
Infectious Disease	33	30	19 - 54	18	6	15 - 47
Metabolic/Electrolyte Disorders	29	31	12 - 49	27	15	13 - 46
Pulmonary Disease	104	26	18 - 38	109	22	17 - 36
Renal Failure	10	30	16 - 78	15	47	20 - 78
Severe Acute Heart Disease	77	34	26 - 50	75	29	30 - 52
Severe Chronic Heart Disease	139	24	16 - 32	138	28	18 - 34
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	157	2	1 - 7	189	4	1 - 9
Gynecologic Disease	19	0	0 -100	23	0	0 -100
Low-Risk Heart Disease	333	2	2 - 6	330	3	2 - 6
Musculoskeletal/Skin Conditions	233	2	1 - 6	237	1	1 - 5
Neuropsychiatric/Sensory Disease	43	2	0 - 21	41	2	1 - 19
Urologic Disease	68	0	0 - 13	56	2	0 - 46

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	230
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	65
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	0
Registered Nurses:	179
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

JAMESON
MEMORIAL
HOSPITAL
1211 WILMINGTON AVE. · NEW CASTLE, PA. 16105-2595
412-658-9001

HOSPITAL 390016

Amy L. Joyce
Public Relations Director

October 20, 1988

NEWS RELEASE
(for immediate release)

Application of the Health Care Financing Administration's (HCFA) mortality data is limited not only from a consumer quality perspective, but for the use of those skilled in the evaluation and utilization of such information for the purposes of quality review.

The data fails in depicting any meaningful information through the omissions of vital issues. Among them, the data fails to address relevant demographic and industry-wide comparative data. More importantly, the data is assertively deficient in the incorporation of severity of illness factors which are indeed complex in nature and lend to a most sophisticated evaluation process.

While the data may have an application in siting major variations from expected ranges, such in itself is clearly of no value for any type of valid quality assessment. Regardless, such application is plainly jeopardized through HCFA's modifications reflected year to year.

Invalid comparisons are drawn in those diagnostic categories subject to revision over 1986. Not only have the names of such categories been changed, but the numbers of codes within them have increased markedly - more than tripling in the case of infectious disease. The category now depicts a completely different patient mix than in the past therefore nullifying any feasible comparison between

1986 and 1987.

Although Jameson Memorial Hospital falls quite favorably within the predicted ranges, the data presented provides little if any usable information. Until the diagnostic categories can be logically established and the multi-faceted social and scientific data needs may be addressed, the process of mortality assessment should not be considered as an alternative to comprehensive quality review and should indeed not be used to make the general public vulnerable to potentially poor health care choices on the foundation of a highly-sensitive issue.

Jameson Memorial Hospital will continue to use as its guide a comprehensive quality review program with the participation of its board of directors, all hospital departments and employees, and each member of the medical/dental staff in order to ensure the appropriate quality standards remain progressive and continue to be met.

# # #

ALJ

JC BLAIR MEMORIAL HOSPITAL

WARM SPRINGS AVE
HUNTINGDON, PA 16652

Medicare Hospital Provider Number: 390056

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	894	12	10 - 16	865	9	11 - 16
Cancer	28	68	24 - 60	31	39	24 - 60
Cerebrovascular Accidents	41	20	16 - 41	42	21	14 - 40
Gastrointestinal Catastrophes	8	13	11 - 64	4	0	8 - 72
Infectious Disease	10	20	9 - 61	10	30	11 - 66
Metabolic/Electrolyte Disorders	6	50	2 - 76	11	45	7 - 64
Pulmonary Disease	51	24	15 - 40	49	10	13 - 34
Renal Failure	9	22	16 - 77	3	33	6 - 89
Severe Acute Heart Disease	58	41	27 - 54	50	26	26 - 52
Severe Chronic Heart Disease	50	12	14 - 34	54	15	16 - 37
Severe Trauma	0	-	-	1	100	0 - 98
Gastrointestinal Disease	57	2	1 - 13	50	0	1 - 11
Gynecologic Disease	11	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	90	1	1 - 8	95	0	3 - 8
Musculoskeletal/Skin Conditions	82	1	1 - 9	97	0	1 - 6
Neuropsychiatric/Sensory Disease	30	0	0 - 27	21	5	0 - 73
Urologic Disease	30	3	0 - 72	17	6	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	104
Occupancy Rate (%):	57
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	45
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	69
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

J.C. Blair
Memorial Hospital

October 21, 1988

Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Attn: Mrs. Sandra Kappert

Medicare Provider #390056

Dear Mrs. Kappert:

Enclosed herewith is a summation of our evaluation of the HCFA 1987 mortality data. We appreciate the opportunity to review this data and submit our concerns about the validity prior to publication.

For the health care provider as well as the consumer to interpret and understand the usefulness of the 1986-87 HCFA comparative mortality statistics, several points must be understood.

First, mortality statistics by themselves should not be construed as indicators of good or bad quality of care. The need to evaluate related health and personal factors in contributing to the patient's condition as well as the severity of illness is essential in judging any statistical demonstration of mortality or outcome. This cannot be overemphasized. If the public is to be an "informed health care consumer", then there must be public awareness and understanding of the existence of potential multiple medical complications which are directly related to and are contributing factors in such outcomes.

Another consideration must be the reliability of the data based on sample size. The smaller the patient population the less reliable the range for projected mortality rate and, in reality, the actual mortality rate itself. For example, if a hospital has only one patient admitted for a diagnostic category and the patient dies, the hospital demonstrates a 100% mortality rate. One should not assume poor quality based on this number alone as the sample size is too small.

Finally, it must be understood that this pure statistical presentation cannot be used to compare hospitals in a quality sense. The size of the facility, the resources available, and especially the disparity of the patient population being serviced effect these statistics as much as the unaddressed health factors in demonstrating the unreliability of this data for comparison purposes.

Even though HCFA has provided American Hospital Association survey information relating to the hospitals, this information has been found to be invalid due to its manipulation by HCFA. To HCFA's credit, they have repeatedly discouraged these types of analyses. However, raw data viewed through the eyes of the non-health care population is going to be misinterpreted. Without benefit of knowledge of who these patients were, the extent of their illness, their life-styles, number of repeated admissions, and their personal wishes as relating to the extent of treatment they receive, the public can only see the cold reality of the numbers displayed.

In our own evaluation of the diagnostic category of cancer patients, many of these points are more clearly demonstrated.

1. Overall death rate for the two year period is 52% which is well within the "predicted mortality" rate as established by HCFA. In a patient sample as small as that of J.C. Blair, one cannot predict the quality of the care provided based on gross statistical findings. The following provides a brief overview of this patient population:

    53% of the expired patients were suffering with multiple metastatic disease processes

    68% of the expired patients had or were still receiving extensive chemical/radiation/surgical treatment for their condition at the time of death

    46% of those receiving therapeutic intervention refused further use of any therapy

    100% of the expired patients requested no resuscitative measures be used in case of cardio-pulmonary arrest

    100% of the expired patients were suffering from severe comorbid states at the time of admission to this facility which were treated aggressively. Since the cause of these comorbidities could not be eliminated, the conditions could not be totally reversed.

In conclusion, without these additional factors being taken into consideration, no quality review is complete. No case or series of cases is ever rejected or judged as poor quality of care based on the single diagnosis alone. It is the overall condition, treatment, and response to those treatments, as well as consideration of patient wishes, which must be considered and evaluated to determine whether the outcome may have been altered. Until HCFA can include these factors in their gross statistical reports, no true evaluation of how a facility performs will be complete or accurate.

Sincerely,

Robert R. Stanley
Chief Executive Officer

RRS/mm

JEANES HOSP

7600 CENTRAL AVE
PHILADELPHIA, PA 19111

Medicare Hospital Provider Number: 390080

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,757	15	11 - 15	2,816	13	11 - 16
Cancer	127	48	32 - 54	123	47	34 - 56
Cerebrovascular Accidents	101	23	19 - 37	97	26	19 - 39
Gastrointestinal Catastrophes	19	32	15 - 58	21	29	14 - 56
Infectious Disease	54	44	26 - 56	44	39	25 - 57
Metabolic/Electrolyte Disorders	41	41	14 - 48	45	24	17 - 48
Pulmonary Disease	183	27	23 - 40	146	34	22 - 41
Renal Failure	4	50	7 - 86	6	83	14 - 80
Severe Acute Heart Disease	95	36	27 - 49	108	40	31 - 52
Severe Chronic Heart Disease	163	28	17 - 32	186	24	19 - 33
Severe Trauma	5	60	5 - 78	4	25	1 - 83
Gastrointestinal Disease	203	3	2 - 8	190	4	1 - 8
Gynecologic Disease	17	6	0 -100	24	0	0 - 96
Low-Risk Heart Disease	392	3	2 - 6	418	2	2 - 6
Musculoskeletal/Skin Conditions	323	5	1 - 7	351	3	1 - 6
Neuropsychiatric/Sensory Disease	56	2	0 - 18	74	0	0 - 8
Urologic Disease	68	3	0 - 21	83	1	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	202
Occupancy Rate (%):	87
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	261
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	0
Registered Nurses:	175
Licensed Practical Nurses:	100

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Jeanes Hospital
7600 Central Avenue • Philadelphia, Pennsylvania 19111 • 215-728-2000

Roger Martin
Senior Vice President
Health Care Operations

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

We have reviewed the results of the 1987 Hospital Mortality Information for Jeanes Hospital, and have found the statistics to be accurate.

We would like to make corrections to the hospital characteristics section of the data. It is our understanding that HCFA will include information taken directly from the 1987 AHA survey for the hospital characteristics. In the survey there were two questions asking about cardiac care units. We responded affirmatively to the question about a combined ICU/CCU. Therefore, we were required to answer no to a free standing CCU. Please correct our characteristics to state that we have a cornary care unit.

Thank you very much for your help in correcting this discrepancy.

Sincerely,

G. Roger Martin
Senior Vice President
Health Care Operations

GRM:lsc

JEANNETTE DISTRICT MEMORIAL HOSPITAL

600 JEFFERSON AVE
JEANNETTE, PA 15644

Medicare Hospital Provider Number: 390010

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,673	10	10 - 14	1,795	12	11 - 15
Cancer	31	42	25 - 61	41	49	30 - 63
Cerebrovascular Accidents	76	20	20 - 39	56	30	20 - 45
Gastrointestinal Catastrophes	24	29	16 - 55	22	23	18 - 57
Infectious Disease	27	30	22 - 59	44	32	24 - 56
Metabolic/Electrolyte Disorders	29	28	15 - 52	40	27	13 - 45
Pulmonary Disease	85	24	18 - 38	72	19	17 - 38
Renal Failure	5	60	11 - 85	7	57	12 - 81
Severe Acute Heart Disease	58	29	27 - 52	73	33	29 - 52
Severe Chronic Heart Disease	126	15	17 - 31	141	21	17 - 32
Severe Trauma	0	-	-	1	100	3 - 98
Gastrointestinal Disease	108	3	1 - 10	107	5	1 - 12
Gynecologic Disease	10	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	282	3	2 - 6	290	3	2 - 6
Musculoskeletal/Skin Conditions	173	2	1 - 7	166	3	1 - 8
Neuropsychiatric/Sensory Disease	38	0	1 - 16	35	0	0 - 27
Urologic Disease	68	1	0 - 18	60	3	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	164
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	91
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	141
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

JEFFERSON HOSPITAL

COAL VALLEY RD
PITTSBURGH, PA 15236

Medicare Hospital Provider Number: 390265

Diagnostic Category	**Calender Year 1987**			**Calender Year 1986**		
	Cases	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**	**Cases**	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**
All Cases	3,999	11	9 - 13	3,958	11	10 - 14
Cancer	123	37	31 - 52	135	47	35 - 57
Cerebrovascular Accidents	148	26	18 - 34	161	21	20 - 35
Gastrointestinal Catastrophes	24	42	23 - 64	33	36	20 - 57
Infectious Disease	61	28	20 - 47	53	25	23 - 52
Metabolic/Electrolyte Disorders	72	24	13 - 40	67	19	11 - 37
Pulmonary Disease	157	29	19 - 37	136	21	18 - 35
Renal Failure	14	71	19 - 76	11	36	8 - 71
Severe Acute Heart Disease	159	28	28 - 45	168	31	30 - 47
Severe Chronic Heart Disease	229	25	18 - 31	222	23	17 - 31
Severe Trauma	3	0	2 - 81	4	50	3 - 82
Gastrointestinal Disease	389	3	1 - 6	366	3	1 - 6
Gynecologic Disease	19	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	472	4	2 - 6	464	3	2 - 6
Musculoskeletal/Skin Conditions	440	1	1 - 5	445	1	1 - 4
Neuropsychiatric/Sensory Disease	127	2	1 - 8	137	1	0 - 8
Urologic Disease	168	2	0 - 9	163	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	464
Occupancy Rate (%):	87
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	263
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	587
Licensed Practical Nurses:	68

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

JEFFERSON PARK HOSPITAL

3905 FORD ROAD
PHILADELPHIA, PA 19131

Medicare Hospital Provider Number: 390149

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	859	15	13 - 19	958	12	11 - 17
Cancer	28	43	19 - 57	24	25	25 - 61
Cerebrovascular Accidents	55	22	19 - 42	34	12	18 - 42
Gastrointestinal Catastrophes	16	50	15 - 63	13	31	14 - 64
Infectious Disease	32	47	22 - 59	17	47	16 - 63
Metabolic/Electrolyte Disorders	12	17	10 - 57	10	30	3 - 63
Pulmonary Disease	49	31	19 - 47	67	31	20 - 45
Renal Failure	7	14	6 - 71	6	50	13 - 85
Severe Acute Heart Disease	32	31	31 - 64	46	41	29 - 58
Severe Chronic Heart Disease	65	6	17 - 31	58	12	16 - 35
Severe Trauma	3	33	7 - 88	1	100	2 - 97
Gastrointestinal Disease	36	8	1 - 31	47	0	1 - 12
Gynecologic Disease	4	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	113	4	1 - 10	111	5	1 - 11
Musculoskeletal/Skin Conditions	62	0	1 - 9	61	0	1 - 9
Neuropsychiatric/Sensory Disease	30	0	0 - 38	55	0	0 - 13
Urologic Disease	24	0	0 - 75	40	0	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	103
Occupancy Rate (%):	54
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	228
Percent of Physicians Who Are Board Certified Specialists:	54
Interns and Residents:	16
Registered Nurses:	63
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

JERSEY SHORE HOSPITAL

THOMPSON STREET
JERSEY SHORE, PA 17740

Medicare Hospital Provider Number: 390106

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	402	9	8 - 15	437	11	8 - 15
Cancer	2	0	10 - 93	6	67	20 - 86
Cerebrovascular Accidents	21	19	11 - 46	11	36	8 - 62
Gastrointestinal Catastrophes	0	-	-	2	0	1 - 90
Infectious Disease	6	50	6 - 75	5	60	7 - 79
Metabolic/Electrolyte Disorders	3	33	6 - 87	6	17	3 - 70
Pulmonary Disease	27	7	11 - 37	23	13	9 - 41
Renal Failure	1	100	1 - 97	1	100	0 - 99
Severe Acute Heart Disease	17	53	20 - 65	22	55	21 - 61
Severe Chronic Heart Disease	31	13	12 - 38	16	13	13 - 49
Severe Trauma	0	-	-	1	100	0 - 98
Gastrointestinal Disease	36	3	0 - 23	40	2	1 - 21
Gynecologic Disease	5	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	64	0	1 - 8	69	1	1 - 11
Musculoskeletal/Skin Conditions	46	0	0 - 13	55	4	1 - 17
Neuropsychiatric/Sensory Disease	5	0	0 -100	4	25	0 -100
Urologic Disease	13	0	0 - 48	16	6	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	52
Occupancy Rate (%):	30
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	29
Percent of Physicians Who Are Board Certified Specialists:	48
Interns and Residents:	0
Registered Nurses:	31
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

JOHN F KENNEDY MEMORIAL HOSPITAL

LANGDON ST AND CHELTENHAM AVE
PHILADELPHIA, PA 19124

Medicare Hospital Provider Number: 390083

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	963	12	9 - 14	964	13	10 - 16
Cancer	20	35	20 - 62	25	32	25 - 63
Cerebrovascular Accidents	30	33	12 - 46	55	35	14 - 40
Gastrointestinal Catastrophes	6	67	10 - 76	9	78	16 - 71
Infectious Disease	10	40	11 - 67	16	31	21 - 67
Metabolic/Electrolyte Disorders	22	41	13 - 56	29	41	9 - 48
Pulmonary Disease	34	15	15 - 42	27	30	13 - 49
Renal Failure	5	0	7 - 71	12	50	17 - 79
Severe Acute Heart Disease	52	21	24 - 48	43	30	25 - 53
Severe Chronic Heart Disease	54	31	14 - 40	60	23	15 - 38
Severe Trauma	2	100	2 - 89	1	0	0 - 99
Gastrointestinal Disease	50	4	0 - 26	63	3	1 - 14
Gynecologic Disease	4	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	148	3	1 - 9	132	1	2 - 6
Musculoskeletal/Skin Conditions	82	2	1 - 12	80	2	0 - 16
Neuropsychiatric/Sensory Disease	24	0	0 - 44	22	14	0 - 99
Urologic Disease	69	1	0 - 46	74	1	0 - 23

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	150
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	245
Percent of Physicians Who Are Board Certified Specialists:	40
Interns and Residents:	0
Registered Nurses:	92
Licensed Practical Nurses:	78

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

A Community Hospital
JFK
**JOHN F. KENNEDY
MEMORIAL HOSPITAL**

October 14, 1988

Nancy J. Blichasz, R.N., Director
Professional Services & Quality Assurance
The Hospital Association of Pennsylvania
P.O. Box 608
1200 Camp Hill
Pennsylvania, PA 17011

Dear Ms. Blichasz:

We have reviewed the statistics submitted by the Department of Health and Human Services. All deaths were verified. As a point of information, the Medical Staff at John F. Kennedy Memorial Hospital performs one hundred percent (100%) mortality review. Any questions that arise are referred to the Chief of the Clinical Department for review and further discussion if necessary.

We did note in reviewing the statistics that twenty-six (26) of the patients listed expired outside of the hospital, but within thirty (30) days of discharge. These mortalities are credited to us.

Please note that while our "SCU" is not listed as a "CCU", we do provide the service, while we do not have an organ transplant service, we do have in place an Organ Donor Program.

Please feel free to contact me if additional information is needed.

Sincerely,

Martha B. Epps

Martha B. Epps, Ph.D.
Executive Director

MBE/yhd

KENSINGTON HOSP

136 W DIAMOND STREET
PHILADELPHIA, PA 19122

Medicare Hospital Provider Number: 390025

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	124	1	2 - 8	134	1	2 - 8
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	1	0	1 - 97
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	3	33	1 - 90	0	-	-
Pulmonary Disease	0	-	-	1	0	1 - 97
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	1	0	0 - 98	0	-	-
Severe Chronic Heart Disease	6	0	3 - 57	8	0	4 - 48
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	5	0	0 -100	2	0	0 -100
Gynecologic Disease	1	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	50	0	0 - 13	42	0	0 - 17
Musculoskeletal/Skin Conditions	8	0	0 -100	13	0	0 -100
Neuropsychiatric/Sensory Disease	11	0	0 - 99	33	0	0 - 27
Urologic Disease	0	-	-	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	45
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	40
Percent of Physicians Who Are Board Certified Specialists:	90
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LANCASTER GENERAL HOSPITAL

555 N DUKE ST
LANCASTER, PA 17604

Medicare Hospital Provider Number: 390100

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	5,052	9	9 - 13	5,090	10	10 - 14
Cancer	159	28	29 - 49	172	35	30 - 50
Cerebrovascular Accidents	171	27	20 - 35	161	20	23 - 38
Gastrointestinal Catastrophes	30	23	19 - 54	49	33	20 - 52
Infectious Disease	65	31	21 - 49	62	35	23 - 51
Metabolic/Electrolyte Disorders	74	23	15 - 41	74	18	16 - 41
Pulmonary Disease	127	19	17 - 34	151	23	17 - 34
Renal Failure	10	30	11 - 73	17	35	15 - 71
Severe Acute Heart Disease	216	28	30 - 45	211	38	32 - 48
Severe Chronic Heart Disease	300	22	15 - 27	280	26	18 - 31
Severe Trauma	16	31	11 - 59	18	22	14 - 57
Gastrointestinal Disease	300	2	2 - 6	319	2	2 - 6
Gynecologic Disease	35	0	0 -100	31	0	0 -100
Low-Risk Heart Disease	784	4	2 - 6	738	3	3 - 6
Musculoskeletal/Skin Conditions	515	2	1 - 5	575	2	1 - 4
Neuropsychiatric/Sensory Disease	254	4	1 - 8	265	3	1 - 7
Urologic Disease	210	0	1 - 5	236	1	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	582
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	263
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	37
Registered Nurses:	534
Licensed Practical Nurses:	106

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LANCASTER
GENERAL

390100

October 20, 1988

Mr. William Roper
Administrator, DHHS
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mr. Roper:

We are writing in response to the Health Care Financing's Administration's Medicare Mortality Information released specific to Lancaster General Hospital.

The individual case listing has been reviewed in detail and the Lancaster General Hospital has found, to the best of our knowledge, that no major discrepancies exist. Regarding the patients expiring after discharge, approximately two-thirds of this category was verified to be accurate, however, it was impossible to determine the cause of death in the majority of cases without further contact with the family. We chose not to make this final contact.

The Lancaster General Hospital currently utilizes the MedisGroups Severity of Illness program as mandated by Pennsylvania State regulation. Analysis of the MedisGroups data supports a direct correlation between severity, age and predicted mortality.

There are no current plans for utilization of the Medicare Mortality Predictor Systems (MMPS), as we feel this would be a duplication of effort. Implementation of MMPS would increase patient care costs unnecessarily.

In reference to the American Hospital Association's (AHA) 1987 Survey statistics, fifteen (15) of the twenty-four (24) beds reported as medical/surgical intensive care are dedicated to cardiac intensive care. An additional eight (8) Trauma/Neuro intensive care beds were listed under AHA's "other intensive care" catagory. The Lancaster General Hospital also maintains thirty (30) additional cardiac care monitored beds not listed in the aforementioned "medical/surgical intensive care" catagory.

We encourage the Health Care Financing Administration to continue its refinement of analytic methodologies and data validation techniques.

Sincerely,

Paul G. Wedel
President

LANKENAU HOSP

LANCASTER CITY LINE AVE
PHILADELPHIA, PA 19151

Medicare Hospital Provider Number: 390195

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,311	10	10 - 14	4,278	10	10 - 14
Cancer	182	40	33 - 52	190	38	34 - 53
Cerebrovascular Accidents	163	14	19 - 32	172	24	21 - 36
Gastrointestinal Catastrophes	29	31	20 - 57	33	36	19 - 55
Infectious Disease	63	32	24 - 51	34	47	26 - 62
Metabolic/Electrolyte Disorders	61	26	13 - 42	59	17	14 - 40
Pulmonary Disease	140	26	19 - 37	139	24	18 - 36
Renal Failure	21	33	17 - 70	16	31	10 - 67
Severe Acute Heart Disease	164	30	28 - 45	138	37	30 - 49
Severe Chronic Heart Disease	253	18	18 - 30	217	17	18 - 30
Severe Trauma	4	25	3 - 80	6	67	9 - 77
Gastrointestinal Disease	233	4	2 - 8	255	2	2 - 7
Gynecologic Disease	43	0	0 -100	51	0	0 - 82
Low-Risk Heart Disease	901	4	2 - 5	777	5	2 - 5
Musculoskeletal/Skin Conditions	283	2	1 - 6	321	1	1 - 5
Neuropsychiatric/Sensory Disease	207	0	1 - 6	241	1	0 - 5
Urologic Disease	126	0	0 - 6	134	1	1 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	413
Occupancy Rate (%):	88
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	264
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	76
Registered Nurses:	569
Licensed Practical Nurses:	39

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

The Lankenau Hospital

Lancaster Avenue west of City Line • Philadelphia, Pennsylvania 19151

215-645-2000

October 20, 1988 Medicare Provider Number 39-0195

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington, D.C.

Dear Doctor Roper:

We have carefully reviewed those Health Care Financing Administration (HCFA) data submitted to The Lankenau Hospital that relate to mortality among patients admitted during 1986 and 1987. We realize that in any undertaking of this size and complexity, there will inevitably be data errors. Indeed, we have noted some discrepancies with regard to the frequency of mortality within particular diagnostic categories. Additionally, we were unable to review mortality of patients which took place after discharge and we question the appropriateness of including this information. We also found that descriptive information presented about Lankenau Hospital is incorrect and we suggest that HCFA present only American Hospital Association survey information without manipulation.

Despite those concerns noted above, the HCFA data as presented do not suggest inappropriate trends related to mortality at Lankenau; this finding is consistent with our own internal mortality review process. Thus, rather than devote a significant portion of this response to address our concerns about the methods and inaccuracies related to the HCFA data, we felt that it would be more appropriate to expand on issues relevant to the public's understanding of how Lankenau mortality data, presented in the HCFA format, should be appropriately interpreted.

First and foremost, it should be clearly stated that the cornerstone of The Lankenau Hospital's commitment to the patients of the region has always been quality of care. Lankenau places emphasis on this quality through a comprehensive and ongoing Quality Assurance Program. The Board of Trustees, Medical Staff, management and employees are directly and constantly involved in reviewing and interpreting the information yielded by this Program. Although this Quality Assurance Program extends to all departments and levels of care within Lankenau, it is important to point out that relevant to the issue at hand, Lankenau reviews, through this Program, all mortality which takes place within the Hospital. This review is conducted by Quality Assurance nurses, staff physicians and Medical Department Chairmen. This exhaustive mortality review process, along with the review of many other criteria, allows Lankenau to determine if there are areas of concern with patient management. Although this review mechanism has revealed no significant issues, we feel strongly that it is an appropriate verifiable system designed to insure optimum patient management.

It is extremely important to point out that mortality can never be used as an indicator of either good or bad care within a hospital. This is particularly true of the HCFA mortality data released with regard to The Lankenau Hospital. Simply stated, the HCFA data do not measure a number of important patient circumstances that may have a direct relationship to the outcome of their hospitalization. Specifically, Lankenau, while supplying valuable primary care services to the community, is a highly sophisticated referral facility that receives many patients with the most serious, complex and emergent conditions. The HCFA data do not measure the severity of a patient's illness at the time of admission; certain comorbid conditions that affect the patient's outcome; where the patient is coming from (another hospital, a nursing home, a boarding home or from a home care arrangement) whether or not the patient is terminally ill; the patient's general health status or psychological state. Further, the HCFA data do not take into account that Lankenau operates a sophisticated Cancer Treatment Center, caring for the most seriously ill cancer patients, a comprehensive cardiology program, receiving the most acutely ill cardiology patients and providing a full component of sophisticated invasive catheterization and surgical procedures, a Hospice Program to care for the terminally ill, and an extremely active Emergency Service that deals with many life-threatening situations. Essentially, the Health Care Financing Administration analysis of mortality data takes into account only those factors that address the average patient. Simply, Lankenau is in a position to care for those patients who are not average, and require expertise and facilities capable of handling illnesses that are more complex, at a later stage and associated with more secondary comorbid factors.

Although the HCFA data presented to The Lankenau Hospital show no inappropriate trend with regard to mortality, Lankenau fully realizes that it cares for patients who are at higher risk based on all those considerations noted above. For this reason The Lankenau Hospital is even more diligent in its quality reviews of patient care.

The Lankenau Hospital applauds the efforts of the Health Care Financing Administration to give the public a better basis of understanding when purchasing health care. Presentation of mortality data, in its current form, is only a very crude beginning in this understanding. No one should infer anything positive or negative from mortality data until many other factors and much more sophisticated statistical techniques are brought into the picture.

Sincerely,

Elizabeth H. Avery
President

LATROBE AREA HOSP

WEST SECOND AVE
LATROBE, PA 15650

Medicare Hospital Provider Number: 390219

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,883	10	10 - 14	2,866	12	10 - 14
Cancer	95	40	35 - 58	100	45	32 - 55
Cerebrovascular Accidents	128	25	18 - 35	104	30	19 - 38
Gastrointestinal Catastrophes	25	36	17 - 57	20	35	15 - 59
Infectious Disease	39	15	19 - 47	44	20	22 - 51
Metabolic/Electrolyte Disorders	28	36	11 - 50	54	13	10 - 36
Pulmonary Disease	146	22	17 - 34	145	28	19 - 37
Renal Failure	6	67	12 - 82	15	60	14 - 72
Severe Acute Heart Disease	92	39	29 - 51	92	39	29 - 51
Severe Chronic Heart Disease	163	19	18 - 32	188	19	17 - 30
Severe Trauma	9	56	6 - 68	10	40	8 - 66
Gastrointestinal Disease	199	2	2 - 7	157	3	2 - 9
Gynecologic Disease	18	0	0 -100	24	0	0 -100
Low-Risk Heart Disease	445	2	2 - 5	452	3	1 - 5
Musculoskeletal/Skin Conditions	275	1	1 - 5	251	2	1 - 6
Neuropsychiatric/Sensory Disease	110	0	1 - 6	128	2	0 - 11
Urologic Disease	114	0	0 - 6	83	1	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	288
Occupancy Rate (%):	74
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	115
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

LAWNDALE COMMUNITY HOSP

DEVEREAUX AVE PALMETTO ST
PHILADELPHIA, PA 19111

Medicare Hospital Provider Number: 390021

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**	**Cases**	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**
All Cases	453	11	9 - 16	534	9	9 - 15
Cancer	9	78	18 - 72	15	73	27 - 72
Cerebrovascular Accidents	31	16	18 - 45	11	18	7 - 55
Gastrointestinal Catastrophes	4	50	4 - 82	3	67	4 - 86
Infectious Disease	6	50	16 - 83	1	0	1 - 97
Metabolic/Electrolyte Disorders	7	14	6 - 65	10	20	7 - 60
Pulmonary Disease	21	38	10 - 51	26	15	9 - 40
Renal Failure	2	50	2 - 92	2	50	2 - 93
Severe Acute Heart Disease	20	35	17 - 58	19	11	25 - 56
Severe Chronic Heart Disease	34	12	13 - 37	34	15	15 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	33	3	0 - 34	67	4	0 - 19
Gynecologic Disease	3	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	55	2	0 - 15	63	0	1 - 8
Musculoskeletal/Skin Conditions	53	4	0 - 44	49	0	0 - 17
Neuropsychiatric/Sensory Disease	9	0	0 - 68	11	0	0 - 92
Urologic Disease	18	0	0 - 98	19	5	0 - 89

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 63
Occupancy Rate (%): 70
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 308
Percent of Physicians Who Are Board Certified Specialists: 81
Interns and Residents: 0
Registered Nurses: 56
Licensed Practical Nurses: 7

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

LEBANON VLY GEN HOSP

4TH WILLOW STS
LEBANON, PA 17042

Medicare Hospital Provider Number: 390232

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	400	11	8 - 15	404	13	8 - 16
Cancer	11	18	19 - 66	11	45	11 - 66
Cerebrovascular Accidents	18	33	8 - 51	19	42	8 - 52
Gastrointestinal Catastrophes	5	40	10 - 82	3	0	2 - 80
Infectious Disease	4	25	3 - 80	1	100	2 - 97
Metabolic/Electrolyte Disorders	7	14	1 - 68	9	11	3 - 57
Pulmonary Disease	18	33	10 - 53	13	15	9 - 52
Renal Failure	1	0	3 - 98	3	100	16 - 91
Severe Acute Heart Disease	19	47	20 - 63	23	48	17 - 57
Severe Chronic Heart Disease	25	12	8 - 37	30	37	9 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	23	4	0 - 44	41	0	0 - 18
Gynecologic Disease	16	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	40	5	0 - 27	41	0	1 - 13
Musculoskeletal/Skin Conditions	58	3	0 - 35	24	0	0 - 46
Neuropsychiatric/Sensory Disease	2	0	0 -100	3	0	0 -100
Urologic Disease	28	0	0 - 85	21	0	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 92
Occupancy Rate (%): 40
Ownership/Control: Private, For Profit

STAFFING

Total Number of Physicians: 75
Percent of Physicians Who Are Board Certified Specialists: 76
Interns and Residents: 0
Registered Nurses: 51
Licensed Practical Nurses: 22

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

LEE HOSP

320 MAIN ST
JOHNSTOWN, PA 15901

Medicare Hospital Provider Number: 390011

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,294	12	10 - 15	2,438	13	11 - 15
Cancer	67	55	29 - 56	80	41	32 - 57
Cerebrovascular Accidents	82	35	19 - 41	111	31	20 - 39
Gastrointestinal Catastrophes	19	26	20 - 62	14	50	13 - 64
Infectious Disease	53	23	23 - 50	52	44	24 - 55
Metabolic/Electrolyte Disorders	19	42	13 - 58	33	33	20 - 55
Pulmonary Disease	111	31	18 - 38	100	20	16 - 35
Renal Failure	9	22	20 - 81	6	17	15 - 81
Severe Acute Heart Disease	104	37	26 - 47	105	39	27 - 48
Severe Chronic Heart Disease	155	26	17 - 32	167	28	17 - 32
Severe Trauma	4	25	4 - 80	1	0	1 - 97
Gastrointestinal Disease	134	1	1 - 6	151	5	1 - 10
Gynecologic Disease	12	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	407	3	2 - 6	376	1	2 - 5
Musculoskeletal/Skin Conditions	242	1	1 - 5	255	2	1 - 5
Neuropsychiatric/Sensory Disease	30	0	0 - 21	51	6	0 - 34
Urologic Disease	77	0	0 - 10	106	1	1 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	321
Occupancy Rate (%):	46
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	178
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	215
Licensed Practical Nurses:	95

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

LEE
HEALTH
SERVICES

Lee Hospital

320 MAIN STREET JOHNSTOWN, PA 15901 (814) 533-0123

October 20, 1988

Medicare Provider No.
39-0011

Health Standards & Quality Bureau
Health Care Financing Administration
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Lee Hospital treats multiple diseases and participates in a regional oncology program. Any indication of potential quality problems, including mortality data, is included in our Quality Review Program.

Mortality rates alone are not an indication of the quality of care provided. Even though we recognize the limitations of mortality data, we use it as an opportunity to evaluate the process of care. All deaths occurring within our institution are routinely reviewed as part of our Quality Review Program. Physician review of these cases includes a determination that the death was expected and the care provided by the hospital was appropriate.

Lee Hospital continues to be committed to providing high quality of care.

Sincerely,

John W. Ungar

John W. Ungar
President

mab

LEHIGH VALLEY HOSPITAL CENTER

1200 S CEDAR CREST BLVD
ALLENTOWN, PA 18105

Medicare Hospital Provider Number: 390261

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,699	8	8 - 12	4,890	9	9 - 13
Cancer	175	39	34 - 54	178	37	30 - 50
Cerebrovascular Accidents	141	13	20 - 33	151	30	20 - 37
Gastrointestinal Catastrophes	25	28	16 - 54	42	36	23 - 56
Infectious Disease	24	29	19 - 57	33	30	23 - 57
Metabolic/Electrolyte Disorders	22	23	10 - 49	25	24	11 - 48
Pulmonary Disease	92	20	15 - 34	112	20	18 - 36
Renal Failure	2	0	2 - 90	2	50	5 - 94
Severe Acute Heart Disease	154	41	28 - 46	200	39	30 - 46
Severe Chronic Heart Disease	165	21	16 - 31	197	24	17 - 31
Severe Trauma	17	18	14 - 56	14	36	13 - 64
Gastrointestinal Disease	330	2	2 - 6	323	4	2 - 7
Gynecologic Disease	6	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	978	3	3 - 6	1,002	2	3 - 5
Musculoskeletal/Skin Conditions	510	1	1 - 4	540	2	1 - 5
Neuropsychiatric/Sensory Disease	104	5	1 - 12	109	1	1 - 8
Urologic Disease	218	0	1 - 5	210	1	0 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	492
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	23
Registered Nurses:	781
Licensed Practical Nurses:	51

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

LEWISTON HOSP

HIGHLAND AVE
LEWISTOWN, PA 17044

Medicare Hospital Provider Number: 390048

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,042	11	9 - 13	2,108	11	10 - 15
Cancer	55	47	28 - 57	56	39	29 - 58
Cerebrovascular Accidents	70	44	16 - 40	71	31	16 - 39
Gastrointestinal Catastrophes	7	29	9 - 72	16	31	14 - 61
Infectious Disease	23	17	18 - 53	36	47	23 - 59
Metabolic/Electrolyte Disorders	32	25	11 - 46	40	7	11 - 36
Pulmonary Disease	97	18	16 - 34	106	14	17 - 34
Renal Failure	13	8	11 - 62	12	33	12 - 72
Severe Acute Heart Disease	82	38	28 - 51	86	41	30 - 52
Severe Chronic Heart Disease	124	25	15 - 32	126	21	17 - 33
Severe Trauma	3	0	4 - 79	1	0	0 - 98
Gastrointestinal Disease	152	3	1 - 9	144	3	1 - 9
Gynecologic Disease	33	0	0 -100	28	0	0 -100
Low-Risk Heart Disease	269	3	2 - 6	257	2	2 - 7
Musculoskeletal/Skin Conditions	180	2	1 - 7	185	4	1 - 9
Neuropsychiatric/Sensory Disease	98	4	0 - 18	115	3	0 - 13
Urologic Disease	58	0	0 - 20	74	4	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 181
Occupancy Rate (%): 83
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 75
Percent of Physicians Who Are Board Certified Specialists: 67
Interns and Residents: 0
Registered Nurses: 163
Licensed Practical Nurses: 73

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: Yes
Hospice Care: No

October 21, 1988

Health Care Financing Administration
Attention: Sandra Kappert
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

RE: 1986 and 1987 Medicare Mortality Data

Dear HCFA,

Lewistown Hospital appreciates the opportunity to comment on the statistics that will be released in December 1988.

It is important that the reader understand the actual mortality figures for Lewistown Hospital and for the predicted mortality range are averages. Comparison of the two rates merely indicates the difference between Lewistown Hospital's average rates and an estimated range.

A mortality rate that is higher or lower than the predicted rate is not an indication of the quality of care provided by Lewistown Hospital. The HCFA system is not capable of determining why the rates differ - differences may be good, bad, or indifferent.

The Lewistown Hospital maintains a comprehensive Quality Assurance Program which does measure the quality of care on a case by case basis. When problems are identified, they are promptly reviewed and changes are made. Also, all Pennsylvania hospitals are required to provide quality of care data to the Pennnsylvania Health Care Cost Containment Council. The system used by this regulatory agency is quite complex and will hopefully provide valuable information to health care providers and consumers.

The Hospital is not able to verify the accuracy of the mortality data reported by HCFA since deaths within 30 days of discharge are included.

There are numerous corrections to other statistical information which are presented under the heading Hospital Characteristics. I will list these corrections in the remaining paragraphs.

Lewistown Hospital is licensed to operate 245 beds. Our actual bed capacity is 199 - an additional 17 beds will be placed in service by January 1989. Our occupancy rate is approximately 78%.

Lewistown Hospital has recently become a teaching hospital in affiliation with the Philadelphia College of Osteopathic Medicine. We have presently three interns.

Lewistown does not have a shock/trauma unit or burn unit and does not perform organ transplants. We do have a hospice program.

Lewistown Hospital employs (full-time and part-time) 166 Registered Nurses and 90 Licensed Practical Nurses as of October 20, 1988. Since many of these professionals do not work on inpatient units, I believe the ratios presented by HCFA are not very helpful. Instead, I suggest that RN/LPN staff worked hours on nursing units be used as the numerator and patient days be used as the denominator.

The physician statistics are outdated but accurately reflect the fact that we have a high percentage of board certified physicians on the Medical Staff.

I hope these comments are of value to HCFA and the public.

Best regards,

William H. DeWire

William H. DeWire
President
Lewistown Hospital

LOCK HAVEN HOSPITAL

24 CREE DRIVE
LOCK HAVEN, PA 17745

Medicare Hospital Provider Number: 390071

Diagnostic Category	**Calender Year 1987**			**Calender Year 1986**		
	Cases	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**	**Cases**	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**
All Cases	819	10	9 - 14	875	9	10 - 15
Cancer	15	33	26 - 73	23	43	27 - 67
Cerebrovascular Accidents	51	20	15 - 39	47	26	15 - 42
Gastrointestinal Catastrophes	5	40	7 - 79	9	22	14 - 69
Infectious Disease	6	33	9 - 75	3	33	7 - 88
Metabolic/Electrolyte Disorders	3	33	2 - 86	11	27	5 - 60
Pulmonary Disease	59	20	13 - 36	59	10	16 - 35
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	42	38	22 - 52	51	33	22 - 49
Severe Chronic Heart Disease	46	20	11 - 36	43	19	13 - 38
Severe Trauma	0	-	-	2	0	0 - 95
Gastrointestinal Disease	77	1	1 - 11	79	1	0 - 11
Gynecologic Disease	5	0	0 -100	3	33	0 -100
Low-Risk Heart Disease	140	3	1 - 8	128	2	2 - 8
Musculoskeletal/Skin Conditions	52	4	0 - 23	66	0	1 - 8
Neuropsychiatric/Sensory Disease	15	0	0 - 81	22	5	0 - 66
Urologic Disease	40	2	0 - 80	39	0	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 263
Occupancy Rate (%): 58
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 41
Percent of Physicians Who Are Board Certified Specialists: 78
Interns and Residents: (not available)
Registered Nurses: (not available)
Licensed Practical Nurses: (not available)

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

LOCK HAVEN HOSPITAL

October 24, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Blvd.
Baltimore, MD 21207

Dear Mrs. Kappert:

Health Care Financing Administration records indicate that there were a total of 77 deaths within 30 days.

Two of the deaths that occurred within 30 days are [redacted] and [redacted]. This reduces Lock Haven Hospital to 75 deaths or 9.1%.

It is interesting to note that all but one of the cancer category patients were "no code" upon admission which means they were in the terminal stages of illnesses and by patient wish no extraordinary means were to be used.

In the severe acute heart disease category 50% of the patients had "no code" prior to admission where they were in such bad condition medically that no extraordinary means were to be used by their wishes.

Severe chronic heart disease category had slightly less than 50% of the patients who died again were no codes and thus were in terminal phases of the illness with no desire on their part to have extraordinary means used.

In low risk heart disease category 1/3 of the patients who expired were again no codes.

In urological disease category, the case was so advanced that 66 2/3 of the patients were no codes prior to admission.

Review of all the deaths and charts in question showed that patient care was appropriate. The fact that over 1/2 of the patients requested that no extraordinary means be taken during that and preceeding admissions meant that the patients were terminal and their deaths were not unexpected.

Sincerely yours,

Al Speth
President

srk

LOWER BUCKS HOSP

BATH RD ORCHARD AVE
BRISTOL, PA 19007

Medicare Hospital Provider Number: 390070

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,676	13	9 - 14	1,759	12	9 - 13
Cancer	39	31	25 - 56	38	42	26 - 59
Cerebrovascular Accidents	85	26	17 - 37	85	27	18 - 38
Gastrointestinal Catastrophes	16	56	19 - 67	17	59	20 - 66
Infectious Disease	27	37	16 - 55	16	25	13 - 58
Metabolic/Electrolyte Disorders	27	41	12 - 52	27	30	9 - 47
Pulmonary Disease	75	23	14 - 36	66	20	13 - 35
Renal Failure	3	100	12 - 87	3	33	5 - 88
Severe Acute Heart Disease	75	41	25 - 49	84	50	28 - 51
Severe Chronic Heart Disease	124	25	14 - 30	94	29	14 - 34
Severe Trauma	3	100	3 - 80	2	50	3 - 92
Gastrointestinal Disease	103	4	1 - 12	133	1	1 - 6
Gynecologic Disease	28	0	0 -100	18	6	0 - 88
Low-Risk Heart Disease	268	1	1 - 5	266	2	1 - 6
Musculoskeletal/Skin Conditions	140	0	1 - 5	147	1	1 - 7
Neuropsychiatric/Sensory Disease	64	2	0 - 17	76	1	0 - 13
Urologic Disease	67	1	0 - 36	89	0	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	283
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	210
Percent of Physicians Who Are Board Certified Specialists:	61
Interns and Residents:	0
Registered Nurses:	229
Licensed Practical Nurses:	100

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

The Lower Bucks Hospital

Bath Road at Orchard / Bristol, Bucks County, PA 19007-3190

(215) 785-9200

Dennis J. Kain
Chief Executive Officer

21 October 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
Baltimore, Maryland 21207

Medicare Provider No. 39-0070

Dear Mrs. Kappert:

In anticipation of the Health Care Finance Administrations (HCFA) release of Medicare Hospital Mortality data for 1987, in December of this year, we are pleased to provide our commentary on such data. While we appreciate the refinements implemented by HCFA in calculating the 1987 predicted mortality rates, which resulted in refining the 1986 data also, we believe that no matter how sophisticated the methods used to develop such rates, the predicted rates still are nothing more than averages. Consequently, a mortality rate that is higher or lower than the predicted rate is not an indication of the quality of care provided patients. In addition, the Medicare mortality rates are misleading because they do not represent the entire patient population of the hospital.

The delivery of quality care is of the utmost importance at our institution. To monitor the quality of care, we have in place a Quality Assurance Program aimed at identifying problems and preventing their recurrence. At the Lower Bucks Hospital, the medical record of each mortality is reviewed at medical staff department level by the Medical Care Evaluation Committee. The activity of the committee is one of the quality assurance functions performed by each department. The hospital's QA program is an ongoing process, one which involves every department in our institution. In addition to this internal review, the hospital's standards of care are monitored by several external organizations for compliance with established criteria. These organizations include the Joint Commission on Accreditation of Health Care Organizations, The Keystone Peer Review Organization, Medical Assistance, Blue Cross, and other third party payors.

Professional review of the Medical Records for the Diagnostic Category of Renal Failure and Trauma patients contained in your report has revealed the following information on the patients and the care provided. Also, it should be mentioned that in each of these categories there are only three patients, and we believe that such a small number of cases in any category will produce statistical distortions. The average age of the three renal deaths was 82.6 years, each patient was admitted through the Emergency Room of the hospital, and each had in excess of four secondary diagnosis indicating the complexity and severity in each case which are not adequately adjusted in the HCFA model. One of the trauma cases in the HCFA data, included an inappropriately categorized case, which actually was aspiration pneumonia, not trauma. The second trauma case consisted of a [redacted] admitted through the Emergency Room in acute hemorrhagic shock from massive blood loss who expired within an hour in the operating room. The third trauma case was an [redacted] who was admitted through the Emergency Room with a massive blood clot to the brain, complicated by multiple medical problems.

The opportunity to share this information is appreciated by our institution.

Sincerely,

Dennis J. Kain
Chief Executive Officer

le

MAGEE WOMEN'S HOSP

FORBES AVE HALKET ST
PITTSBURGH, PA 15213

Medicare Hospital Provider Number: 390114

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	411	4	8 - 13	418	6	8 - 13
Cancer	32	25	25 - 58	35	29	25 - 58
Cerebrovascular Accidents	2	0	1 - 91	1	0	1 - 97
Gastrointestinal Catastrophes	0	-	-	4	50	11 - 87
Infectious Disease	1	0	0 - 99	0	-	-
Metabolic/Electrolyte Disorders	4	0	17 - 81	3	67	6 - 87
Pulmonary Disease	1	100	0 - 98	2	0	0 - 99
Renal Failure	1	100	2 - 97	0	-	-
Severe Acute Heart Disease	2	100	9 - 93	4	0	8 - 72
Severe Chronic Heart Disease	1	0	0 - 98	2	0	0 - 99
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	11	0	0 - 99	25	0	0 - 34
Gynecologic Disease	68	0	0 - 80	79	0	0 - 76
Low-Risk Heart Disease	8	0	0 - 82	6	0	0 - 99
Musculoskeletal/Skin Conditions	9	0	0 - 96	6	0	0 - 83
Neuropsychiatric/Sensory Disease	1	0	0 -100	0	-	-
Urologic Disease	26	4	0 - 58	19	0	0 - 93

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	286
Occupancy Rate (%):	84
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	210
Percent of Physicians Who Are Board Certified Specialists:	91
Interns and Residents:	0
Registered Nurses:	345
Licensed Practical Nurses:	74

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MAGEE-WOMENS HOSPITAL

October 24, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, Maryland 21207

Dear Mr. Roper:

We have reviewed the mortality information regarding Medicare patients treated at Magee-Womens Hospital during 1987 and have the following comments regarding its accuracy and interpretation.

1. Hospital records indicate 996 Medicare admissions during 1987 rather than the 578 reported by Medicare. Use of the hospital's statistics would reduce the hospital's overall Medicare mortality rate by 40%. Although we recognize this discrepancy could reflect multiple admissions of individual beneficiaries to different hospitals, this discrepancy seems too large to explain in this manner.

2. All deaths reported by HCFA for 1987 were verified and reviewed against the hospital's quality assurance standards. No cases received a negative standard of care. It was determined that all deaths were expected, including those that occurred following discharge.

3. All three diagnostic categories where Magee exceeded the predicted mortality rate were defined as high risk categories by Magee. In addition, there was only one discharge in two of these categories and two discharges in the third category (severe acute heart disease). Thus any statistical comparison would not be relevant.

4. For your information, page 5 of the attached letter reflects a correction of the hospital characteristics that were defined by HCFA.

FORBES AVENUE AND HALKET STREET PITTSBURGH, PENNSYLVANIA 15213
An equal opportunity employer, Magee-Womens Hospital is dedicated to the care of women and infants
and is a corporate member of The University Health Center of Pittsburgh.

I thank you for the opportunity to review and comment on this data prior to its public release. It is my understanding these comments will be presented to the public as supplemental information to be used in interpreting the data. In that regard, I have also attached a detailed review conducted by my staff. If you have any questions or comments regarding this letter, please do not hesitate to contact me.

Sincerely,

Daniel J. Lebish

Daniel J. Lebish
Vice President/Finance
(412) 647-4460

DJL/sms

Attachment

cc: Geoffrey J. Suszkowski, D.P.S.
Henry J. Smith
Barbara A. Spagnol
Michele Solomon
Nancy Blichasz (HAP)
Walter Wayne (HCWP)

MCKEESPORT HOSPITAL

1500 FIFTH AVENUE
MCKEESPORT, PA 15132

Medicare Hospital Provider Number: 390002

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,703	15	11 - 15	3,833	14	12 - 16
Cancer	155	50	32 - 53	213	50	36 - 56
Cerebrovascular Accidents	155	28	19 - 35	138	30	19 - 36
Gastrointestinal Catastrophes	31	52	25 - 62	47	62	23 - 55
Infectious Disease	64	47	23 - 52	60	45	25 - 55
Metabolic/Electrolyte Disorders	72	31	13 - 41	66	27	13 - 41
Pulmonary Disease	173	23	20 - 36	171	25	17 - 34
Renal Failure	25	56	18 - 70	22	41	17 - 71
Severe Acute Heart Disease	145	35	29 - 47	181	30	29 - 45
Severe Chronic Heart Disease	214	27	17 - 31	257	23	17 - 30
Severe Trauma	6	17	7 - 70	1	100	0 - 97
Gastrointestinal Disease	295	3	2 - 7	317	2	1 - 6
Gynecologic Disease	24	4	0 -100	20	0	0 - 35
Low-Risk Heart Disease	531	4	2 - 6	541	3	2 - 5
Musculoskeletal/Skin Conditions	281	4	1 - 7	264	2	1 - 6
Neuropsychiatric/Sensory Disease	59	2	0 - 17	79	0	0 - 8
Urologic Disease	158	1	1 - 6	151	3	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	338
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	160
Percent of Physicians Who Are Board Certified Specialists:	57
Interns and Residents:	50
Registered Nurses:	331
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

THOMAS H. PRICKETT
EXECUTIVE DIRECTOR

October 19, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Provider Number: 390002

Dear Mrs. Kappert,

Once again, let me first thank HCFA for allowing us the opportunity to review and comment upon the information to be released in your most recent Mortality Report.

This year's information raises new concerns different from those in 1987. As you may recall, in the past most hospital administrators - while applauding your intent to supply the public with information that would help individuals make their decisions about health care - felt that releasing raw data could only lead to misinterpretation, thereby further clouding the very picture you had hoped to clear.

While we feel that those initial concerns remain valid, our problem with this year's mortality statistics is compounded by the fact that we have found gross discrepancies when we compare your information to ours. These discrepancies begin in the Hospital Characteristics section and permeate the statistical analyses for each of our diagnostic categories.

We feel that at this time, we cannot comment on the data as presented because to do so might lead the public to believe that we have validated it's accuracy, which we cannot.

In the letter from Dr. William Roper, HCFA Administrator, that accompanied this report, he said, "In an exercise of this size, it is possible that there are errors in the data used to conduct the analysis. We would be particularly interested in any instances where our records may be inaccurate regarding patient admission to your facility. These patient-specific incidents should be appended to your comments that you wish to be published in conjunction with your hospital data."

McKeesport Hospital • 1500 Fifth Avenue • McKeesport, PA 15132 • (412) 664-2300

It is our opinion that Mr. Roper did not expect any hospital to uncover the multitude of errors we found even during just a partial analysis of this data. Thus, whereas last year we expressed concerns about possible public misinterpretation of data that was basically accurate, this year those concerns are exacerbated by doubts that the data you are planning to release truly reflects the situation at each hospital.

Sincerely,

Thomas H. Prickett
Thomas H. Prickett
Executive Director

/ad

MEADVILLE MEDICAL CENTER

751 LIBERTY ST
MEADVILLE, PA 16335

Medicare Hospital Provider Number: 390113

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,086	13	10 - 14	2,186	11	10 - 14
Cancer	52	46	27 - 57	40	57	32 - 65
Cerebrovascular Accidents	76	37	17 - 40	89	22	18 - 37
Gastrointestinal Catastrophes	27	52	18 - 57	17	29	13 - 58
Infectious Disease	19	42	16 - 60	25	28	15 - 53
Metabolic/Electrolyte Disorders	30	33	13 - 50	27	11	9 - 41
Pulmonary Disease	105	29	17 - 37	105	22	16 - 35
Renal Failure	17	53	18 - 74	10	60	15 - 79
Severe Acute Heart Disease	61	48	29 - 55	86	41	30 - 52
Severe Chronic Heart Disease	98	24	15 - 33	115	25	18 - 35
Severe Trauma	3	33	6 - 87	5	0	13 - 70
Gastrointestinal Disease	192	5	1 - 9	189	3	1 - 7
Gynecologic Disease	27	0	0 -100	27	0	0 -100
Low-Risk Heart Disease	242	3	2 - 7	226	2	2 - 7
Musculoskeletal/Skin Conditions	229	4	1 - 8	248	1	1 - 5
Neuropsychiatric/Sensory Disease	44	0	0 - 15	71	3	0 - 17
Urologic Disease	90	0	0 - 8	91	1	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	318
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	188
Licensed Practical Nurses:	79

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEDICAL CENTER BEAVER PA INC

1000 DUTCH RIDGE RD
BEAVER, PA 15009

Medicare Hospital Provider Number: 390036

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,811	13	11 - 14	3,943	13	10 - 14
Cancer	174	48	33 - 54	194	45	34 - 54
Cerebrovascular Accidents	177	25	19 - 34	147	22	19 - 34
Gastrointestinal Catastrophes	30	43	19 - 57	37	35	21 - 55
Infectious Disease	22	36	20 - 61	46	41	24 - 56
Metabolic/Electrolyte Disorders	72	18	13 - 38	69	20	10 - 36
Pulmonary Disease	183	31	19 - 36	195	34	18 - 35
Renal Failure	9	67	18 - 82	10	40	17 - 80
Severe Acute Heart Disease	143	39	30 - 48	131	34	29 - 47
Severe Chronic Heart Disease	197	25	15 - 29	242	27	16 - 30
Severe Trauma	6	17	8 - 71	4	75	6 - 81
Gastrointestinal Disease	302	2	2 - 6	291	3	1 - 7
Gynecologic Disease	30	0	0 - 97	32	0	0 -100
Low-Risk Heart Disease	491	3	2 - 6	514	4	2 - 6
Musculoskeletal/Skin Conditions	362	2	1 - 6	379	3	1 - 6
Neuropsychiatric/Sensory Disease	106	4	1 - 12	107	7	0 - 17
Urologic Disease	181	1	0 - 6	170	2	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	491
Occupancy Rate (%):	58
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	162
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	15
Registered Nurses:	371
Licensed Practical Nurses:	91

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSP

325 BELMONT ST
YORK, PA 17403

Medicare Hospital Provider Number: 390101

Diagnostic Category	**Calender Year 1987**			**Calender Year 1986**		
	Cases	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**	**Cases**	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**
All Cases	1,318	11	9 - 14	1,313	13	9 - 14
Cancer	37	38	26 - 59	43	33	30 - 60
Cerebrovascular Accidents	56	13	16 - 35	56	21	17 - 40
Gastrointestinal Catastrophes	13	31	11 - 61	11	27	11 - 63
Infectious Disease	12	17	12 - 58	15	27	13 - 59
Metabolic/Electrolyte Disorders	25	20	12 - 48	30	17	7 - 40
Pulmonary Disease	40	10	12 - 35	36	25	13 - 44
Renal Failure	7	57	16 - 85	4	50	8 - 86
Severe Acute Heart Disease	75	44	27 - 51	69	45	28 - 53
Severe Chronic Heart Disease	72	21	14 - 34	52	17	10 - 33
Severe Trauma	2	0	1 - 91	0	-	-
Gastrointestinal Disease	92	3	1 - 12	105	3	1 - 10
Gynecologic Disease	4	0	0 -100	19	5	0 -100
Low-Risk Heart Disease	198	2	2 - 7	177	6	1 - 10
Musculoskeletal/Skin Conditions	139	1	1 - 6	154	3	0 - 9
Neuropsychiatric/Sensory Disease	43	2	0 - 23	41	0	0 - 18
Urologic Disease	39	0	0 - 36	43	5	0 - 50

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	138
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	84
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	28
Registered Nurses:	121
Licensed Practical Nurses:	89

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Memorial
Hospital
325 S. Belmont St., P.O. Box M-118, York, Pennsylvania 17405 (717) 843-8623

Medicare Provider 390101

RE: Comments on 1987 HCFA Mortality Statistics

Memorial Hospital has found errors in the 1986 hospital characteristics. The correct data for 1987 is as follows.

Beds	162
Occupancy Rate	69
Ownership/control	private, non-profit

Staffing

Total number of physicians	84
Percent of physicians who are board certified specialists	64
Interns and Residents per bed	0.19
Registered nurses per bed	1.18
Licensed practical nurses per bed	0.67

We believe that the Mortality Statistics should not be used for quality comparisons between hospitals, nor should they be used as the sole quality indicator for any particular hospital.

MEMORIAL HOSP INC

YORK AVE RD 1
TOWANDA, PA 18848

Medicare Hospital Provider Number: 390236

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	519	12	9 - 16	597	15	9 - 16
Cancer	12	58	18 - 70	14	71	23 - 69
Cerebrovascular Accidents	23	26	13 - 49	22	41	10 - 51
Gastrointestinal Catastrophes	6	0	14 - 65	8	0	15 - 58
Infectious Disease	5	40	6 - 78	5	80	12 - 79
Metabolic/Electrolyte Disorders	4	0	2 - 73	5	0	1 - 70
Pulmonary Disease	42	12	13 - 36	43	23	14 - 42
Renal Failure	3	33	12 - 96	2	50	7 - 96
Severe Acute Heart Disease	26	62	21 - 58	28	32	23 - 57
Severe Chronic Heart Disease	26	23	8 - 42	42	31	12 - 41
Severe Trauma	1	0	1 - 97	3	0	2 - 80
Gastrointestinal Disease	40	5	0 - 39	53	4	0 - 22
Gynecologic Disease	5	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	81	4	1 - 13	85	2	1 - 11
Musculoskeletal/Skin Conditions	38	5	0 - 28	56	2	0 - 16
Neuropsychiatric/Sensory Disease	6	0	0 -100	16	0	0 - 87
Urologic Disease	22	0	0 - 76	15	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	99
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	15
Percent of Physicians Who Are Board Certified Specialists:	53
Interns and Residents:	0
Registered Nurses:	55
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEMORIAL HOSPITAL

October 20, 1988 Medicare Provider # 390236

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

The data used by HCFA indicates that a total of 519 Medicare patients were admitted to Memorial Hospital in 1987 and of this number 62 died within 30 days of admission. Our records indicate Memorial Hospital had 820 Medicare discharges and 49 total deaths of patients still in the Hospital. While the methodology used by HCFA is presumably accurate, the methodology makes it impossible to verify and to determine its accuracy.

A detailed review of the charts listed by HCFA indicates a number of discrepencies with the final diagnosis and coding. For example, in the category of severe acute heart disease, it is the opinion of our Medical Staff Quality Assurance Review that the diagnosis code should be corrected in six cases which would lower mortality in this category to 50%. This and other numbers were additionally inflated by the hospital's attached Skilled Nursing Unit and association with the Bradford County Manor. Frequently, as a patient's condition worsens, patients are transferred to the hospital for the additional care that is required and a high number of these patients, by their choice, have written "do not resuscitate" orders.

We are pleased our mortality rate has dropped and remains within the range of predicted mortality; however, we feel strongly that the studies are not an accurate measure of hospital quality and should not be used as a measure of hospital performance. The numbers are in no way as extensive as the Quality Assurance activities conducted in the hospital.

Finally, Memorial Hospital supports HCFA efforts to improve and monitor quality and appreciates information which helps us focus our Quality Assurance activities.

MEMORIAL HOSP OF BEDFORD CNTY

RD 1
EVERETT, PA 15537

Medicare Hospital Provider Number: 390117

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	888	15	11 - 17	882	13	11 - 17
Cancer	17	88	29 - 65	19	84	36 - 73
Cerebrovascular Accidents	49	20	17 - 41	77	30	18 - 39
Gastrointestinal Catastrophes	6	33	15 - 82	6	50	11 - 79
Infectious Disease	8	50	10 - 72	12	75	24 - 73
Metabolic/Electrolyte Disorders	28	29	15 - 52	25	8	13 - 43
Pulmonary Disease	43	30	17 - 46	45	22	15 - 41
Renal Failure	3	33	11 - 93	2	100	11 - 97
Severe Acute Heart Disease	49	45	27 - 55	31	42	24 - 59
Severe Chronic Heart Disease	83	25	13 - 34	55	15	14 - 35
Severe Trauma	2	100	2 - 88	1	0	1 - 97
Gastrointestinal Disease	89	7	1 - 17	92	3	1 - 12
Gynecologic Disease	8	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	132	5	1 - 10	147	3	1 - 9
Musculoskeletal/Skin Conditions	77	3	0 - 14	54	0	0 - 11
Neuropsychiatric/Sensory Disease	14	0	0 - 85	23	0	0 - 66
Urologic Disease	30	0	0 - 47	30	0	0 - 54

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	95
Occupancy Rate (%):	48
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	58
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	70
Licensed Practical Nurses:	35

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

Memorial Hospital of Bedford County
R.D. 1, Box 80, Everett, Pennsylvania 15537-9513
Telephone: (814) 623-6161
James C. Vreeland, FACHE
Director

October 20, 1988

Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

RE: HEALTH CARE FINANCING ADMINISTRATION'S MORTALITY RELEASE

The following is a summation of the mortality data for Memorial Hospital of Bedford County which we feel explains the mortality percentage rates:

CANCER - 88% - This represents a total of 15 patients dying either in or within 30 days of discharge. Of the fifteen, eight were patients of the hospice unit and many had DNR orders.

CEREBROVASCULAR ACCIDENTS - 20% which represents a total of nine patients dying in or within 30 days of discharge. Of these nine, the average age was 80 years. All nine patients had other complications such as pulmonary problems, diabetes, heart failure, etc. and also DNR orders.

GASTROINTESTINAL CATASTROPHES - 33% representing two patients with the average age being 81 years. Both of these patients had hepatic failure complicated by either cancer with extensive metastasis or congestive heart failure. One was a patient of the hospice unit.

INFECTIOUS DISEASE - 50% represents a total of four patients with average age of 83 years. Two of the four had multiple other complicating factors.

METABOLIC/ELECTROLYTE DISTURBANCES - 29% representing eight patients with average age of 80 years. All patients had multiple problems such as cancer, congestive heart failure, cerebrovascular accident, anemia, etc. One of the eight was a hospice patient.

PULMONARY DISEASE - 30% representing thirteen patients with the average age of 85 years. Again, we see elderly patients with complicating factors and DNR notes.

RENAL FAILURE - 33% represent one 98 year old patient with many other problems along with the renal problem.

SEVERE ACUTE HEART DISEASE - 45% representing twenty-two patients with average age of 75 years. Ten of the 22 died within 24 hours of admission. All patients with the exception of three were admitted to intensive cardiac care with all but 2 patient having other complicating problems.

SEVERE CHRONIC HEART DISEASE - 25% representing twenty-one patients with average age of 80 years with all but one patient having complications and many with DNR orders.

SEVERE TRAUMA - 100% representing two patients with average age of 84 years. Only one patient died in the hospital having subdural hematoma and other injuries.

After reviewing the above categories, I question the meaningfulness of this data in relation to the volume of patients we actually treat - for instance cancer cases. Medicare patient outcomes are not representative of all our patient outcomes. For example: Severe trauma with a 100% mortality certainly does not present a true picture of the trauma cases treated at this institution.

The hospital characteristics are not correct. They should appear as follows:

Beds - - - - 95

Total Number of Physicians - - - - 55

Percent of Physicians Who Are
Board Certified Specialists - - - - 63

Specialty Service:

Coronary Care Unit - - - - Yes

Hospice Care - - - - Yes

Thank you for considering the above comments.

Sincerely,

James C. Vreeland, FACHE
Chief Executive Officer

JCV/lao

MERCY CATHOLIC MEDICAL CENTER

LANSDOWNE & BAILY RDS
DARBY, PA 19023

Medicare Hospital Provider Number: 390156

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,121	15	12 - 16	4,118	15	12 - 16
Cancer	165	40	32 - 53	152	41	32 - 53
Cerebrovascular Accidents	209	27	18 - 32	213	30	19 - 34
Gastrointestinal Catastrophes	29	38	18 - 56	35	40	17 - 53
Infectious Disease	108	35	24 - 48	87	38	28 - 54
Metabolic/Electrolyte Disorders	110	18	14 - 37	126	17	15 - 37
Pulmonary Disease	211	31	19 - 36	223	25	19 - 34
Renal Failure	17	41	11 - 68	23	35	15 - 68
Severe Acute Heart Disease	204	45	32 - 49	231	36	32 - 48
Severe Chronic Heart Disease	293	21	16 - 28	273	27	17 - 30
Severe Trauma	12	25	9 - 60	13	38	7 - 61
Gastrointestinal Disease	219	4	1 - 8	252	3	1 - 7
Gynecologic Disease	41	2	0 - 91	44	0	0 - 84
Low-Risk Heart Disease	428	4	2 - 6	431	4	2 - 6
Musculoskeletal/Skin Conditions	303	2	1 - 6	324	2	1 - 5
Neuropsychiatric/Sensory Disease	111	4	1 - 11	78	4	0 - 23
Urologic Disease	235	1	0 - 7	174	2	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 615
Occupancy Rate (%): 79
Ownership/Control: Church

STAFFING

Total Number of Physicians: 330
Percent of Physicians Who Are Board Certified Specialists: 63
Interns and Residents: 75
Registered Nurses: 711
Licensed Practical Nurses: 63

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

Mercy
CATHOLIC MEDICAL CENTER

Lansdowne Avenue and Baily Road
Darby, Pennsylvania 19023
(215) 237-4000

Hospital I.D.: 390156

October 20, 1988

William L. Roper, M.D.
Administrator
Health Standards and Quality Bureau
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Doctor Roper:

Thank you for sending us the mortality data. We appreciate the opportunity to review the data prior to its publication.

Mercy Catholic Medical Center is committed to assuring the highest standards of care for its patients through a comprehensive and on-going Quality Assurance Program. Our Quality Review Department consisting of quality assurance nurses, staff physicians, and Clinical Department Chairmen, monitors the quality of care for every patient. The cornerstone of our program is the MedisGroup System which allows review of all mortality by the Medical Staff at their clinical department meetings. At MCMC the quality assurance commitment extends from the Board of Trustees to the Medical Staff and Administration all of whom are intimately involved in reviewing and interpreting the information. We believe strongly that MCMC has a verifiable system in place designed to insure quality care to all its patients.

We are pleased to note that the actual mortality for all our categories were within the predicted range.

We would comment, however, that the hospital statistics contain several errors. In fiscal year 1986, MCMC had 625 beds in operation. There are 295 members on the Active or Associate Medical Staff of which 192 or 65% are Board certified. Also, MCMC does not perform organ transplant services. Finally, we believe that some of the ratios for registered nurses, licensed practical nurses, and resident physicians are in error.

Sincerely yours,

Plato A. Marinakos
Executive Vice President

PAM/mrc

An Affiliate of Mercy Health Corporation of Southeastern Pennsylvania

MERCY HOSP

25 CHURCH ST PO BX 658
WILKES BARRE, PA 18765

Medicare Hospital Provider Number: 390169

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,412	14	11 - 15	2,599	12	10 - 14
Cancer	64	41	29 - 56	62	47	29 - 57
Cerebrovascular Accidents	125	20	19 - 35	120	18	21 - 37
Gastrointestinal Catastrophes	26	42	13 - 53	28	36	17 - 55
Infectious Disease	37	35	22 - 55	31	39	17 - 54
Metabolic/Electrolyte Disorders	47	34	15 - 47	59	34	11 - 41
Pulmonary Disease	93	23	16 - 36	87	25	14 - 35
Renal Failure	14	64	17 - 75	12	50	22 - 84
Severe Acute Heart Disease	139	38	29 - 48	127	39	29 - 49
Severe Chronic Heart Disease	168	31	15 - 30	170	22	15 - 30
Severe Trauma	4	50	2 - 83	1	0	2 - 97
Gastrointestinal Disease	171	5	1 - 11	197	3	1 - 7
Gynecologic Disease	21	0	0 -100	38	0	0 - 98
Low-Risk Heart Disease	325	3	1 - 6	311	5	1 - 7
Musculoskeletal/Skin Conditions	211	3	1 - 7	210	4	1 - 8
Neuropsychiatric/Sensory Disease	66	0	1 - 9	82	5	0 - 20
Urologic Disease	86	1	0 - 21	116	1	1 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	213
Occupancy Rate (%):	81
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Mercy Hospital

Medicare Provider Number: 390169

RESPONSE TO HCFA MORTALITY DATA

Mercy Hospital, Wilkes-Barre, appreciates the opportunity to respond to the Health Care Financing Administration's (HCFA) planned Medicare Mortality Data Release.

Mercy's commitment to quality patient care is the foundation on which its long history and reputation as a leading healthcare provider has been built. Mercy maintains a comprehensive quality assurance program which monitors and evaluates the quality and appropriateness of all patient care services. We express great confidence in the methodologies that we have put in place to measure and evaluate quality. The process is managed on an ongoing basis by a staff of Quality Assessment professionals with direction and guidance from an involved and participative Medical Staff and Administration.

Edward M. Stein, Jr., President and Chief Executive Officer of Mercy Hospital said, "Mercy's sincere commitment to quality is a common thread among the Board of Directors, Medical Staff, Administration and employees. This dedication at all levels is the true strength of our organization and the primary reason for our demonstrated excellence in quality."

Mercy once again placed within HCFA's predicted mortality range for all causes. Although the rate itself has increased numerically from 1986 - 1987, the predicted range has also increased proportionately, which indicates that patients with more severe and intense risk factors were treated during that period. Additionally, Mercy's actual internal mortality rate, derived from a formula which includes all Medicare patients treated during calendar year 1987, is a much lower figure and decreases HCFA's statistic by nearly one-half.

Another significant fact concerning Mercy is that its Medicare patient population averages 50-55% of all its admissions while the average Medicare mix for all other hospitals in Pennsylvania is approximately 38%. It is therefore evident that Mercy cares for an older, more severely ill patient population than most other hospitals.

Richard Alley, M.D., President of Mercy's Medical Staff responded to the HCFA report by stating, "Mercy Hospital places significant value on the quality of care it provides. Mortality data alone does not give us a precise measure of quality but it does provide us with a guide for peer review purposes. HCFA's efforts are a preliminary, yet incomplete step towards developing an adequate model for assessing quality."

25 Church Street, P.O. Box 658
Wilkes-Barre, PA 18765 • (717) 826-3100
A member of Mercy Med-Care, Inc.
Sponsored by The Religious Sisters of Mercy-Province of Scranton

Mercy Hospital

MEDICARE PROVIDER NUMBER: 390169

RESPONSE TO STATISTICAL INFORMATION

The following is Mercy Hospital's response to the statistical information that was included in the HCFA Mortality Data.

For the most part, we found the data to be accurate. There was one error, however, in the all other disease category. A patient (medical record [redacted]) was reported as being admitted to our Hospital on [redacted] discharged on [redacted] and expired on [redacted] We would like to point out that this patient was in our institution on the above dates but she did not expire. This patient is still alive today [redacted]

Regarding the AHA Hospital statistical portion of the report, the 1986 statistics are incorrect.

At this time we are submitting the following accurate 1987 data :

Total Number Licensed Beds	303
Total Number Operational Beds	228
Total Adult Occupancy Rate 1987	75.1%
Total Number of Physicians on Staff	237
Total Number of Board Certified Physicians	158
Total # of RN's on Staff	256
Total # of LPN's on Staff	82
Total # Medical/Surgical ICU Beds	8
Total # Cardiac Care Beds	8

We appreciate the opportunity to relay this information to you.

Thank you.

25 Church Street, P.O. Box 658
Wilkes-Barre, PA 18765 • (717) 826-3100
A member of Mercy Med-Care, Inc.
Sponsored by The Religious Sisters of Mercy-Province of Scranton

MERCY HOSPITAL

2500 SEVENTH AVE
ALTOONA, PA 16603

Medicare Hospital Provider Number: 390121

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,377	12	11 - 15	1,496	13	11 - 16
Cancer	71	39	31 - 57	79	49	35 - 61
Cerebrovascular Accidents	53	23	14 - 38	55	25	15 - 39
Gastrointestinal Catastrophes	10	20	13 - 65	23	43	18 - 60
Infectious Disease	21	33	16 - 58	11	9	24 - 66
Metabolic/Electrolyte Disorders	28	14	15 - 47	26	35	12 - 52
Pulmonary Disease	78	22	14 - 35	64	19	17 - 39
Renal Failure	4	25	11 - 87	3	33	8 - 91
Severe Acute Heart Disease	48	33	23 - 51	56	46	25 - 52
Severe Chronic Heart Disease	83	28	13 - 34	108	22	16 - 34
Severe Trauma	5	40	3 - 78	0	-	-
Gastrointestinal Disease	88	6	1 - 16	94	2	1 - 10
Gynecologic Disease	18	0	0 -100	23	0	0 -100
Low-Risk Heart Disease	192	4	2 - 9	156	2	2 - 7
Musculoskeletal/Skin Conditions	123	4	1 - 11	151	1	1 - 7
Neuropsychiatric/Sensory Disease	29	7	0 - 70	38	5	1 - 24
Urologic Disease	72	0	1 - 8	66	0	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	183
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	92
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	157
Licensed Practical Nurses:	29

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Mercy Hospital

Sister Anne Trzeciak, C.S.F.N.
Chief Executive Officer

2500 Seventh Avenue, Altoona, PA 16603 (814) 949-4101
MEDICARE PROVIDER NUMBER: 390121

October 17, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

Mercy Hospital of Altoona, Pennsylvania has reviewed the HCFA Mortality Data for 1987. Please be advised that there are several errors in your records which were used to calculate the mortality rates. They are as follows:

1. Patient's date of death is incorrect; Corrected date of death, [redacted] Patient I.D. [redacted]
2. Patient's date of death is incorrect; Corrected date of death, [redacted] Patient I.D. [redacted]
3. Patient's date of death is incorrect; Corrected date of death, [redacted]. Patient I.D. [redacted]
4. Patient's date of admission is incorrect; Corrected date of admission, [redacted]. Patient I.D. [redacted]
5. Erroneous principle diagnosis code; Corrected code, 482.0. Patient I.D. [redacted]
6. Erroneous principle diagnosis code; Corrected code, 410.2. Patient I.D. [redacted]
7. Erroneous discharge date; Corrected date, [redacted] Patient I.D. [redacted]

Sincerely,

Sister Anne Trzeciak CSFN

Sister Anne Trzeciak, C.S.F.N.
Chief Executive Officer

SAT:dav

MERCY HOSPITAL

746 JEFFERSON AVE
SCRANTON, PA 18501

Medicare Hospital Provider Number: 390237

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,490	12	10 - 14	3,513	12	10 - 14
Cancer	135	34	28 - 49	158	36	29 - 50
Cerebrovascular Accidents	134	28	18 - 35	128	30	18 - 36
Gastrointestinal Catastrophes	32	44	19 - 56	38	26	19 - 52
Infectious Disease	45	42	19 - 51	57	35	22 - 51
Metabolic/Electrolyte Disorders	36	33	20 - 55	52	27	18 - 48
Pulmonary Disease	129	21	15 - 33	139	28	16 - 34
Renal Failure	16	44	17 - 73	11	45	13 - 76
Severe Acute Heart Disease	154	40	27 - 45	166	39	28 - 46
Severe Chronic Heart Disease	167	28	15 - 30	174	21	16 - 31
Severe Trauma	9	67	12 - 70	5	20	5 - 75
Gastrointestinal Disease	206	3	1 - 8	209	2	1 - 7
Gynecologic Disease	32	0	0 -100	32	0	0 - 69
Low-Risk Heart Disease	726	5	2 - 6	631	4	2 - 6
Musculoskeletal/Skin Conditions	313	2	1 - 6	297	4	1 - 7
Neuropsychiatric/Sensory Disease	86	1	0 - 11	101	3	0 - 12
Urologic Disease	101	0	0 - 7	98	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

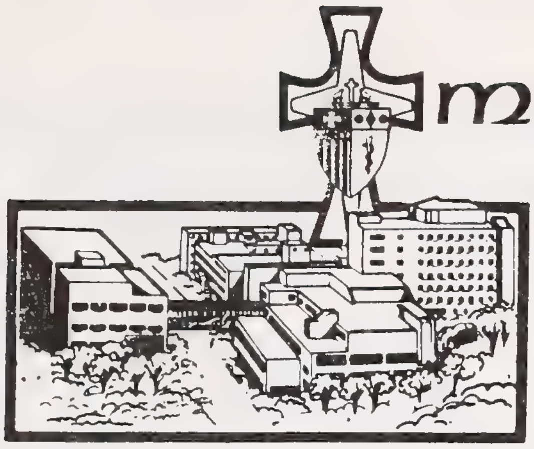
Total Beds (#):	365
Occupancy Rate (%):	73
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	143
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	327
Licensed Practical Nurses:	115

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No



mercy hospital
746 jefferson avenue,
scranton, pennsylvania 18501

October 24, 1988

Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Hospital ID: 390237

Dear Ms. Kappert:

We reviewed the 1987 mortality statistics for Mercy Hospital which you forwarded to us. We have no argument regarding the numbers but are concerned about the manner in which they may be used, particularly since the figures for many categories are not statistically significant.

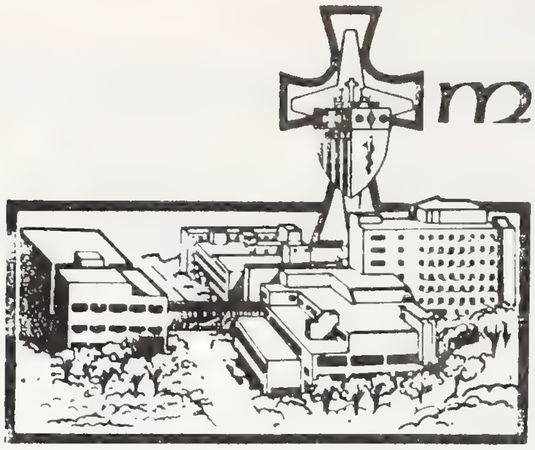
Since all of our in-hospital deaths are reviewed each month by members of various departments, we did not attempt to go through all records again. We did look at the records of those listed in the categories of Trauma, Gastro-intestinal Catastrophies, Metabolic Disturbances, and Infectious Disease. We would have had trouble in placing terminal patients of advanced age in such neat bundles but, regardless of that, we felt that changes in quality or intensity of treatment would not have altered outcomes. We were unable to verify the cause of death in every instance of patients who died at home.

Sincerely,

Louis R Murphy

Louis R. Murphy, M.D.
Director of Medical Affairs

dmm



mercy hospital
746 jefferson avenue,
scranton, pennsylvania 18501

October 24, 1988

Comments - Medicare Hospital Mortality Information,
Mercy Hospital, Scranton, Pennsylvania

------ METABOLIC DISTURBANCES

20 mortality cases

7 expired during hospitalization

average age, 79 years

5 expired within 30 days of discharge

average age, 81 years

8 expired after 30 days of discharge

average age, 79 years

------ INFECTIOUS DISEASE

25 mortality cases

16 expired during hospitalization

average age, 76 years

3 expired within 30 days of discharge

average age, 80 years

6 expired after 30 days of discharge

average age, 81 years

mercy hospital
746 jefferson avenue,
scranton, pennsylvania 18501

------ TRAUMA

5 mortality cases... all expired during hospitalization

average age, 78 years

------- GASTROINTESTINAL CATASTROPHES

18 mortality cases... 13 expired during hospitalization , average age 78 years

1 patient expired within 30 days of discharge

86 years of age

4 patients expired after 30 days of discharge

average age, 78 years

Since all of our in-hospital deaths are reviewed each month by members of various departments, we did not attempt to go through all records again. We did look at the records of those listed in the categories of Trauma, Gastro-intestinal Catastrophies, Metabolic Disturbances, and Infectious Disease. We would have had trouble in placing terminal patients of advanced age in such neat bundles, but, regardless of that, we felt that changes in quality or intensity of treatment would not have altered outcomes. We were unable to verify the cause of death in eveny instance of patients who died at home.

Sister William Joseph R.S.M.

Sister William Joseph, R.S.M.

MERCY HOSPITAL - PITTSBURGH

PRIDE LOCUST STS
PITTSBURGH, PA 15219

Medicare Hospital Provider Number: 390028

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,122	10	10 - 14	3,939	10	11 - 15
Cancer	228	33	31 - 49	199	35	34 - 53
Cerebrovascular Accidents	139	29	18 - 35	136	18	19 - 34
Gastrointestinal Catastrophes	30	33	21 - 58	28	29	17 - 54
Infectious Disease	26	38	20 - 58	25	56	26 - 66
Metabolic/Electrolyte Disorders	50	32	14 - 45	67	28	21 - 48
Pulmonary Disease	107	21	18 - 36	113	26	19 - 38
Renal Failure	12	50	16 - 76	13	46	21 - 81
Severe Acute Heart Disease	181	27	29 - 45	171	32	30 - 46
Severe Chronic Heart Disease	184	17	18 - 31	172	20	19 - 33
Severe Trauma	13	31	7 - 59	14	36	7 - 59
Gastrointestinal Disease	262	3	1 - 7	247	1	2 - 6
Gynecologic Disease	23	0	0 -100	25	0	0 -100
Low-Risk Heart Disease	802	3	2 - 5	619	2	3 - 6
Musculoskeletal/Skin Conditions	377	2	1 - 5	391	3	1 - 5
Neuropsychiatric/Sensory Disease	121	3	1 - 10	123	2	1 - 9
Urologic Disease	139	1	0 - 8	115	0	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	493
Occupancy Rate (%):	85
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	268
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	115
Registered Nurses:	532
Licensed Practical Nurses:	74

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

The Mercy Hospital of Pittsburgh [illegible]
Locust Street
Pittsburgh, PA [illegible]

Mercy Hospital

Kenneth R. Buser, FACHE
Executive Vice President/Chief Operating Officer

October 20, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

The Mercy Hospital of Pittsburgh would like to take this opportunity to express our appreciation to the Department of Health and Human Services and the Health Care Financing Administration for the progress made in the statistical methods used to trend the hospital mortality data, for providing us with patient specific listings and most importantly for sharing the data in advance of release and allowing us to comment.

Mercy Hospital, part of the Pittsburgh Mercy Health System is a 500-bed teaching hospital and tertiary care facility offering a full range of medical and surgical services as well as pediatrics, obstetrics and psychiatry. It is an accredited Level 1 Trauma Center and houses many specialty care units including a burn center, medical/surgical intensive care unit, cardiovascular surgery intensive care unit, coronary care unit, neonatal intensive care unit, apheresis/dialysis center and rehabilitation/spinal cord injury unit.

Mercy is staffed by 398 physicians, 75% of whom are board certified specialists. Because Mercy is a teaching hospital, patients are cared for by a team of health care professionals including interns, residents and nurses. Mercy offers six hospital-based residency programs, four affiliated residency programs, one jointly-sponsored residency program, three hospital-based fellowships and three affiliated fellowships resulting in a percentage of 1.04% registered nurses per bed, .097% licensed practical nurses per bed and .26% residents per bed.

Please accept the following comments from The Mercy Hospital of Pittsburgh to be included with the data release.

In none of the diagnostic categories does Mercy's mortality rate fall above the range of the predicted mortality rate. For all cases the range of the predicted mortality rate is 10 to 14% and Mercy has an overall actual mortality rate of 10% which is exactly at the beginning of the range.

In two of the sixteen diagnostic categories Mercy's mortality rate falls below the beginning of the range and in eleven of the categories Mercy's rate is very close to the beginning of the predicted range.

A review of patient records from several of the diagnostic categories revealed that all patients were acutely ill (unresponsive, obtunded, increased respiratory distress, decreased level of consciousness, rapidly deteriorating) upon admission. The patients had many long-standing, underlying conditions of a severe or life threatening nature were reflected in the medical record but not reflected in the assignment to a DRG.

A DRG is supposed to indicate a relatively homogeneous group of patients; however, in reality there is a great variation in the patients within a DRG. The DRG number is typically determined by the principal diagnosis, which is the reason the patient is admitted to the hospital. Although some DRG's do consider whether the patient has complications, they do not recognize the severity of the patient upon admission, the seriousness of the complications or even the number of complications. The data does not take into account the condition of the patient, be it from illness or accident, on admission. Nor does it distinguish terminally ill patients.

The data does not reflect per-hospital services and treatment; the advanced stage of the patient's illness which necessitated admission to the hospital; quality of care rendered; presence of multiple secondary complicating illnesses; or the severity of the patient's disease. Likewise, to attribute a patient's death to a hospital because the death occurred after discharge but within 30 days of the last hospital admission does not measure quality of care or the patient's compliance with prescribed treatment regimens.

Thank you again for the opportunity to comment on this data.

Sincerely,

Mr. Kenneth R. Buser, FACHE
Executive Vice President/Chief Operating Officer

KRB/pr

cc: Sister Joanne Marie Andiorio, R.S.M.
President & Chief Executive Officer

MERCY HOSPITAL OF JOHNSTOWN

1020 FRANKLIN ST
JOHNSTOWN, PA 15905

Medicare Hospital Provider Number: 390060

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,360	13	10 - 14	1,408	12	9 - 14
Cancer	29	31	24 - 59	34	32	22 - 56
Cerebrovascular Accidents	50	40	18 - 46	39	36	16 - 46
Gastrointestinal Catastrophes	18	28	13 - 57	18	39	15 - 60
Infectious Disease	18	56	18 - 63	13	62	20 - 70
Metabolic/Electrolyte Disorders	18	67	15 - 59	16	38	8 - 57
Pulmonary Disease	74	24	15 - 37	86	29	14 - 36
Renal Failure	8	38	5 - 74	14	29	12 - 70
Severe Acute Heart Disease	43	35	23 - 53	57	44	25 - 52
Severe Chronic Heart Disease	74	16	15 - 33	60	15	14 - 34
Severe Trauma	1	0	0 - 97	2	0	4 - 89
Gastrointestinal Disease	133	5	1 - 11	141	1	1 - 7
Gynecologic Disease	25	0	0 -100	25	0	0 -100
Low-Risk Heart Disease	194	5	2 - 9	164	2	1 - 7
Musculoskeletal/Skin Conditions	102	3	0 - 13	122	4	0 - 13
Neuropsychiatric/Sensory Disease	45	4	0 - 31	42	0	0 - 17
Urologic Disease	53	0	1 - 11	46	0	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	254
Occupancy Rate (%):	63
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	75
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	140
Licensed Practical Nurses:	76

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Provider # - 390060

The Mercy Hospital of Johnstown

1020 FRANKLIN STREET JOHNSTOWN, PENNSYLVANIA 15905-4186

October 12, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building 2-D-2
6325 Security Blvd.
Baltimore, Md 21207

RE; 1987 Mortality Data

To Whom It May Concern:

We would like to begin our comments by stressing that these statistics should not be used to assess the quality of care provided by an institution. As you will see from our comments below, even with revisions in the methodology used, the mortality statistics are, at best, incomplete.

The data given for the category "Metabolic and Electrolyte Disturbances" indicates that our actual mortality rate is higher than the upper limits of the predicted range. In evaluating the methodologies and the actual case information relating to these patients a number of issues arise which have a direct bearing on the interpretation of the statistics.

The description of the methodology used indicates that 8 comorbid conditions were considered in establishing the predicted ranges. However, these conditions were only considered if the codes for these conditions were listed in the first 4 diagnoses listed after the principal diagnosis. A review of our records shows that in 7 of the 18 cases comorbid conditions were not included because they were listed as the fifth or later listed code. The result being that patients did not appear as ill as they actually were. In addition, the presence or absence of a comorbid condition does not reflect the severity of the condition, i.e. a patient may have cancer that is under control or he may be in the terminal stages of the illness. All that appears in the record is a code for cancer, cardiac or renal disease. This was the situation for those cases in the category - "Metabolic and Electrolyte Disturbances": 7 of the 12 patients who died had either terminal cancer or end-stage cardiac disease.

Transfer status was also considered in the determination of the predicted ranges. We assume that this means transfer between acute care facilities since the need for this type of transfer usually means a sicker patient. However, admissions from long-term care facilities are apparently not considered a significant factor. The need for long-term care could indicate a number of factors that directly relate to the potential for mortality - severe chronic illness, multiple medical problems or terminal illness.

Forty-two percent of our deaths in the above mentioned category were admitted from long-term care facilities.

Patients may also have comorbid conditions, other than those included within the methodology, that could impact the predicted mortality range if considered. Our review of the medical record found the presence of such conditions as: active seizures, acute anemias and infectious conditions.

Finally, the method of coding the reason for admission directly impacts the statistics. The prospective payment system requires that the principal or first diagnosis be the reason the patient was admitted. In 16 of the 18 cases in the category - "Metabolic and Electrolyte Disturbances" - the reason for admission was dehydration, a symptom of an underlying disease. In all cases medical management corrected the dehydration. Death, when it occurred was the result of the underlying cause of the dehydration, i.e. cancer, diabetes, end-stage cardiac disease, multiple system failure etc. If the cause of the dehydration could be listed as the principle diagnosis these patients would not even be in this category, the result being a totally different statistical picture.

Sincerely,

TR Baranik

T.R. Baranik
President

METHODIST HOSPITAL

2301 S BROAD ST
PHILADELPHIA, PA 19148

Medicare Hospital Provider Number: 390205

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,084	11	10 - 14	2,152	12	11 - 15
Cancer	45	33	30 - 60	56	41	32 - 61
Cerebrovascular Accidents	77	18	17 - 36	76	26	17 - 38
Gastrointestinal Catastrophes	13	31	21 - 70	22	36	21 - 63
Infectious Disease	27	48	21 - 60	15	13	18 - 58
Metabolic/Electrolyte Disorders	69	20	14 - 40	50	38	21 - 52
Pulmonary Disease	113	24	20 - 39	106	17	19 - 37
Renal Failure	8	38	9 - 76	9	33	14 - 78
Severe Acute Heart Disease	65	42	26 - 52	91	42	28 - 50
Severe Chronic Heart Disease	155	13	16 - 29	166	22	16 - 31
Severe Trauma	2	0	1 - 90	3	33	2 - 86
Gastrointestinal Disease	127	4	1 - 11	133	1	1 - 7
Gynecologic Disease	19	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	316	2	2 - 6	317	4	2 - 7
Musculoskeletal/Skin Conditions	147	2	1 - 8	153	5	1 - 10
Neuropsychiatric/Sensory Disease	49	4	0 - 34	52	0	0 - 16
Urologic Disease	69	0	0 - 13	78	0	1 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 258
Occupancy Rate (%): 81
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 199
Percent of Physicians Who Are Board Certified Specialists: 84
Interns and Residents: 0
Registered Nurses: 203
Licensed Practical Nurses: 65

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

Methodist Hospital

[illegible]
[illegible]

October 20, 1988

Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Provider No. 390205

Dear Mrs. Kappert:

Although the mortality data for Methodist Hospital are at the low end of the predicted ranges, our staff will continue to perform ongoing quality reviews. Quality has always been our priority, and indepth quality review is key to maintaining the Methodist standard. We encourage patients who have questions about quality to discuss them with doctors.

Even though the HCFA data show Methodist in a good light, it is virtually impossible to draw firm conclusions about a hospital from mortality data. The information only suggest areas where more detailed review might be indicated. Higher mortality rates are expected at hospitals with patients who are very critically ill. For instance, some hospitals admit large number of Medicare patients with multiple medical problems, including cancer. This is why we, at Methodist, submit individual cases for peer review by other doctors to assure that quality care is provided in every case.

The Federal Administration itself has acknowledged that mortality rates are not a good measure of relative quality at different hospitals. It has attempted to refine the data to take account of some factors, such as age, which may explain legitimate differences in mortality rates. However, some other important factors have still been ignored. They include how severely ill patients are at the time of admission and differences in their social and economic backgrounds which can complicate their diseases.

Methodist staff believe that a patient should have full confidence in his or her doctor and hospital, and that such confidence can contribute to a quicker and more complete recovery from illness. Further, we agree that the public should have access to more valid information about the quality of care. We encourage all our patients and their families to raise concerns and to ask questions of their physicians and hospital staff.

Thank you for the opportunity to comment on this data. Attached please find corrections to the hospital characteristics information.

Sincerely yours,

Michael J. Bradley
President & Chief Executive Officer

MJB:md
Attachment

METRO HEALTH CENTER

252 ELEVENTH ST
ERIE, PA 16501

Medicare Hospital Provider Number: 390193

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	760	9	8 - 13	808	9	8 - 13
Cancer	12	33	21 - 72	15	53	20 - 68
Cerebrovascular Accidents	30	30	13 - 47	34	29	15 - 46
Gastrointestinal Catastrophes	8	13	15 - 67	6	17	9 - 71
Infectious Disease	5	60	6 - 78	5	0	13 - 69
Metabolic/Electrolyte Disorders	8	38	7 - 69	8	25	7 - 66
Pulmonary Disease	46	11	13 - 34	43	14	15 - 39
Renal Failure	2	50	6 - 95	4	25	9 - 85
Severe Acute Heart Disease	13	46	16 - 67	21	57	25 - 66
Severe Chronic Heart Disease	41	29	13 - 42	48	19	14 - 38
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	70	3	0 - 15	66	5	1 - 16
Gynecologic Disease	3	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	112	4	1 - 10	105	3	1 - 10
Musculoskeletal/Skin Conditions	118	0	1 - 5	104	2	0 - 11
Neuropsychiatric/Sensory Disease	26	4	0 - 77	33	0	0 - 24
Urologic Disease	20	10	0 -100	39	3	1 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	150
Occupancy Rate (%):	36
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	95
Percent of Physicians Who Are Board Certified Specialists:	61
Interns and Residents:	9
Registered Nurses:	60
Licensed Practical Nurses:	32

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

METROPOLITAN HOSP

201 NORTH EIGHTH ST
PHILADELPHIA, PA 19106

Medicare Hospital Provider Number: 390059

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,215	18	11 - 17	1,200	21	12 - 18
Cancer	42	40	26 - 58	44	55	27 - 59
Cerebrovascular Accidents	33	30	14 - 45	34	24	17 - 46
Gastrointestinal Catastrophes	10	20	8 - 61	4	25	3 - 80
Infectious Disease	29	59	19 - 56	54	50	25 - 56
Metabolic/Electrolyte Disorders	77	31	11 - 39	72	39	13 - 41
Pulmonary Disease	75	40	16 - 40	79	49	17 - 41
Renal Failure	18	61	13 - 68	24	33	12 - 66
Severe Acute Heart Disease	17	18	21 - 59	25	68	27 - 63
Severe Chronic Heart Disease	83	16	14 - 31	67	19	13 - 33
Severe Trauma	2	0	2 - 89	0	-	-
Gastrointestinal Disease	62	13	1 - 24	41	2	1 - 19
Gynecologic Disease	3	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	137	3	1 - 9	155	4	2 - 9
Musculoskeletal/Skin Conditions	92	5	0 - 18	89	7	0 - 22
Neuropsychiatric/Sensory Disease	65	5	0 - 39	26	4	0 - 36
Urologic Disease	41	2	0 - 34	43	7	0 - 36

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 185
Occupancy Rate (%): 64
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 230
Percent of Physicians Who Are Board Certified Specialists: 60
Interns and Residents: 66
Registered Nurses: 150
Licensed Practical Nurses: 10

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

METROPOLITAN HOSPITAL

201 N. Eighth Street
Philadelphia, Pennsylvania 19106
(215) 238-2050

Stephen M. Patz
Chief Executive Officer

October 20, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We have received the Medicare Hospital Mortality Information which pertains to the three hospitals in our system, Metropolitan Hospital-Springfield Division, Metropolitan Hospital-Parkview Division and Metropolitan Hospital-Central Division.

After careful review of the information and patient records, we submit the attached comments regarding HCFA's Mortality statistics for our hospitals.

Thank you for the opportunity to respond.

Sincerely yours,

Stephen M Patz

Stephen M. Patz
Chief Executive Officer

/lrs

Attachments

METROPOLITAN HOSPITAL

Executive Offices
801 Arch Street, Fifth Floor
Philadelphia, Pennsylvania 19107
(215) 238-6700

Medicare Provider #390059

CENTRAL DIVISION

In the category of "Infectious Disease," Metropolitan Hospital-Central Division had an actual mortality rate of 59% with a predicted range of 19-56%.

A small number of cases, 17, were diagnosed as sepsis-related deaths.

1. Fourteen of these patients were admitted from nursing homes with chronic disease.
2. The average age of these patients was 84 years with one patient being 102.
3. One-third of the patients was so severely ill upon admission that they died with a 24 hour period.

A review of the treatment of these cases by our Quality Assurance Committee confirmed that, in light of the extreme severity of illness, all appropriate measures were taken to insure that proper care had been given to these patients.

METROPOLITAN HOSP PARKVIEW DIV

1331 E WYOMING AVE
PHILADELPHIA, PA 19124

Medicare Hospital Provider Number: 390234

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,561	15	10 - 15	1,680	17	11 - 16
Cancer	45	64	26 - 57	49	51	25 - 55
Cerebrovascular Accidents	65	20	17 - 38	76	20	16 - 36
Gastrointestinal Catastrophes	13	38	9 - 61	22	64	20 - 62
Infectious Disease	44	55	24 - 56	24	63	22 - 62
Metabolic/Electrolyte Disorders	37	35	15 - 50	52	35	14 - 45
Pulmonary Disease	77	39	16 - 40	82	35	18 - 41
Renal Failure	3	67	4 - 87	18	44	20 - 76
Severe Acute Heart Disease	60	42	25 - 51	56	43	24 - 51
Severe Chronic Heart Disease	111	14	14 - 29	119	25	15 - 33
Severe Trauma	2	50	1 - 93	4	50	5 - 83
Gastrointestinal Disease	87	3	1 - 12	92	5	1 - 14
Gynecologic Disease	23	0	0 -100	16	6	0 -100
Low-Risk Heart Disease	219	4	1 - 8	238	5	1 - 8
Musculoskeletal/Skin Conditions	112	3	0 - 11	137	4	0 - 12
Neuropsychiatric/Sensory Disease	24	0	0 - 32	28	14	0 - 88
Urologic Disease	73	0	0 - 9	77	3	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	231
Ownership/Control:	Private, For Profit

STAFFING

Interns and Residents:	27
Registered Nurses:	140
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

METROPOLITAN HOSPITAL

Executive Offices
801 Arch Street, Fifth Floor
Philadelphia, Pennsylvania 19107
(215) 238-6700

Medicare Provider #390234

PARKVIEW DIVISION

Metropolitan Hospital-Parkview Division offers the following comments with regard to the 1987 Health Care Financing Administration's (HCFA) mortality data.

In the category "Cancer," the established range was 26-57%. The mortality range is listed as 64%--the only category that is beyond range.

- The total number of cases reported in this category is 45.
- Twenty-nine of this number were eventual mortalities.
- Among these cases, seven died after discharge from Parkview so that the exact cause of death is unknown, although each had a terminal diagnosis so that death was not unexpected.
- With regard to the remaining 22 cases:
  - -- one patient died within 24 hours of admission
  - -- a review of the 21 other cases reveals a variety of cancer diagnoses, but all in the terminal stages.

The following salient points must be noted regarding these cases:

1. More than 85% of these patients were over 70 years of age.

2. Because of the terminal nature of their illness, 16 or 76% of the patients had requested, or their family had requested, that no life-saving measures be taken.

3. It is our opinion that all of the patients received appropriate and compassionate care during their terminal disease state.

The hospital characteristics are inaccurate with regard to "ownership/control."

Metropolitan Hospital-Parkview Division is a private, not-for-profit facility.

METROPOLITAN HOSP-SPRING DIV

THOMSON AND SPROUL ROADS
SPRINGFIELD, PA 19064

Medicare Hospital Provider Number: 390155

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	865	13	11 - 17	865	13	11 - 16
Cancer	37	49	24 - 58	36	44	24 - 58
Cerebrovascular Accidents	40	22	15 - 42	33	18	16 - 44
Gastrointestinal Catastrophes	6	50	14 - 81	6	17	8 - 71
Infectious Disease	10	70	16 - 70	4	25	13 - 86
Metabolic/Electrolyte Disorders	4	50	0 - 97	13	23	4 - 55
Pulmonary Disease	61	26	18 - 42	68	35	19 - 44
Renal Failure	10	80	25 - 84	3	100	12 - 87
Severe Acute Heart Disease	30	30	25 - 58	36	47	25 - 57
Severe Chronic Heart Disease	55	13	15 - 35	44	18	13 - 37
Severe Trauma	7	29	7 - 70	1	100	3 - 99
Gastrointestinal Disease	51	4	0 - 21	48	4	0 - 27
Gynecologic Disease	4	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	160	3	1 - 8	131	1	2 - 6
Musculoskeletal/Skin Conditions	75	3	1 - 13	95	1	1 - 8
Neuropsychiatric/Sensory Disease	11	0	0 - 99	16	0	0 - 66
Urologic Disease	24	0	0 - 54	32	0	0 - 35

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	122
Ownership/Control:	Private, For Profit

STAFFING

Interns and Residents:	26
Registered Nurses:	78
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

METROPOLITAN HOSPITAL

Executive Offices
801 Arch Street, Fifth Floor
Philadelphia, Pennsylvania 19107
(215) 238-6700

Medicare Provider #390155

SPRINGFIELD DIVISION

A review of the HCFA mortality information for 1987 reveals an error in the listing of hospital statistics.

Please note that Metropolitan Hospital-Springfield Division is a not-for-profit hospital and a division of Metropolitan Hospital.

A Non-profit Osteopathic Multi-hospital System

MEYERSDALE COMMUNITY HOSP

200 HOSPITAL DR
MEYERSDALE, PA 15552

Medicare Hospital Provider Number: 390015

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	328	18	12 - 21	318	21	11 - 21
Cancer	4	50	8 - 84	3	67	13 - 94
Cerebrovascular Accidents	19	21	12 - 50	18	28	11 - 52
Gastrointestinal Catastrophes	2	50	1 - 93	4	50	8 - 84
Infectious Disease	5	0	18 - 74	4	50	7 - 83
Metabolic/Electrolyte Disorders	7	29	11 - 73	9	56	10 - 70
Pulmonary Disease	28	36	19 - 54	28	32	11 - 47
Renal Failure	6	83	20 - 87	3	100	13 - 89
Severe Acute Heart Disease	15	53	19 - 67	14	50	18 - 67
Severe Chronic Heart Disease	23	26	9 - 46	21	43	11 - 52
Severe Trauma	1	0	2 - 97	0	-	-
Gastrointestinal Disease	33	6	2 - 25	32	3	1 - 25
Gynecologic Disease	1	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	39	3	0 - 23	39	8	0 - 33
Musculoskeletal/Skin Conditions	26	4	1 - 29	25	12	0 - 66
Neuropsychiatric/Sensory Disease	7	29	0 - 99	1	0	0 -100
Urologic Disease	2	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	43
Occupancy Rate (%):	37
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	12
Percent of Physicians Who Are Board Certified Specialists:	25
Interns and Residents:	0
Registered Nurses:	21
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MID VALLEY HOSPITAL ASSN

1400 MAIN ST
PECKVILLE, PA 18452

Medicare Hospital Provider Number: 390109

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	489	10	8 - 14	467	12	8 - 15
Cancer	17	35	18 - 63	8	25	16 - 73
Cerebrovascular Accidents	22	9	13 - 42	19	37	10 - 53
Gastrointestinal Catastrophes	2	0	1 - 91	7	57	4 - 71
Infectious Disease	15	20	11 - 54	4	25	9 - 83
Metabolic/Electrolyte Disorders	10	20	3 - 60	9	44	6 - 67
Pulmonary Disease	18	22	9 - 49	19	16	7 - 44
Renal Failure	2	100	11 - 96	1	100	2 - 97
Severe Acute Heart Disease	26	46	20 - 57	30	40	22 - 57
Severe Chronic Heart Disease	20	15	11 - 45	8	25	5 - 64
Severe Trauma	0	-	-	1	0	0 - 99
Gastrointestinal Disease	63	2	0 - 14	51	0	0 - 12
Gynecologic Disease	2	0	0 -100	0	-	-
Low-Risk Heart Disease	82	2	0 - 12	80	2	1 - 12
Musculoskeletal/Skin Conditions	41	7	0 - 81	33	3	0 - 53
Neuropsychiatric/Sensory Disease	10	0	0 -100	8	0	0 -100
Urologic Disease	21	0	0 - 97	23	0	0 - 45

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	66
Occupancy Rate (%):	35
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	35
Percent of Physicians Who Are Board Certified Specialists:	51
Interns and Residents:	0
Registered Nurses:	44
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Mid-Valley Hospital Association

PECKVILLE, PA.

ID #390109
Date prepared: 10/7/88

COMMENTS ON MID-VALLEY HOSPITAL ASSN. MORTALITY STATISTICS FOR 1987 DISCHARGES

The U.R. Committee feels that all mortalities for the calendar year 1987 fell within the predicted range. In fact, after review of the actual mortality rates in each specific diagnostic category, it was determined that they had significantly decreased since 1986.

Each diagnostic category will be discussed individually.

CANCER All seven cases reviewed involved patients with end-stage metastatic carcinoma. Age range was 67 years to 81 years.

CVA Four cases involved with age range of 81-89 years. A four cases had no-code status applied.This decreased significantly since last year with actual mortality rate decreasing from 37 to 9 per cent.

NEUROPSYCHIATRIC AND SENSORY No cases.

GI CATASTROPHES No cases.

GI DISEASES Age range was 57 to 84 years. [redacted] had an acute MI with cardiogenic shock post-operatively and did not survive. [redacted] had multiple medical complications and was transferred to a skilled care facility with a poor prognosis for long-term survival.

UROLOGIC DISEASE No cases.

GYNECOLOGIC DISEASE No cases.

LOW RISK HEART DISEASE [redacted] was a hospital coding error which had been reported to KePRO for upward DRG payment. We are awaiting chart review. ICD Code was 434.9 not 433.9.

Two cases were unstable angina with multiple medical complications and two were uncontrolled atrial fibrillation with multiple medical complications. Age range was 76-92 with questionable long-term survival.

SEVERE CHRONIC HEART DISEASE Five cases were CHF with multiple medical problems including renal failure, ASHD, carcinoma with metastasis and cardiac arrest. Age range was 70 to 91. Two cases had end-stage cardiomyopathy.

SEVERE ACUTE HEART DISEASE Twelve cases reported with age range from 65-88 years. Seven acute myocardial infarct. One pulmonary embolus. Three cardiac arrest. All acute MI's had complication of CHF.

METABOLIC AND ELECTROLYTE DISTURBANCES Age range was 66-76 years. All patients had multiple medical problems including carcinoma, CVA, Diabetes and infected decubitus ulcers.

MUSCULOSKELETAL AND CUTANEOUS CONDITIONS Six cases ages 77-92 years. All orthopedic diagnoses with multiple medical problems including dehydration, CVA, hypertension, UTI, Diabetes, PVD and ASHD.

PULMONARY DISEASE Seven cases ages 56-92 years. All 7 cases were pneumonia - 3 aspiration pneumonia. All patients had multiple medical problems.

RENAL FAILURE Two cases ages 83 and 94 years. One was chronic renal failure with terminal carcinoma and the second was Acute Renal Failure with End-Stage Cardiac Disease and multiple coagulation problems. Both were seen by nephrology consultants and were not candidates for dialysis.

INFECTIOUS DISEASE Four cases age 63-85 years. All had multiple medical problems, one terminal cancer.

ALL OTHER DISEASES Seventeen cases with age range 73-99 years. Three cases were CHF with HCVD. One case was COPD with End-Stage Respiratory Failure. One cardiac arrest - cause unknown. One patient had 3° heart block. Other 10 cases had multiple medical problems.

SUMMATION

86% of the patients in the Mortality Statistics were over 70 years of age.
The review determined that the patient population was elderly with multiple medical problems that were irreversible and the patients sucummbed to the cummulative effect of their disease process. It was felt that the overall mortality had decreased in most of the diagnostic categories and the quality of care was appropriate.

Regarding the "All Other Disease" category, it was felt to be too broad and needs to be restructured. Many patients listed in it should have been listed under other diagnostic categories that were more specific.
Example: Hepatoma - under Cancer
Third Degree Heart Block, CHF with HCVD - under Cardiac Category

MILLCREEK COMMUNITY HOSPITAL

5515 PEACH ST
ERIE, PA 16509

Medicare Hospital Provider Number: 390198

Diagnostic Category	**Calender Year 1987**			**Calender Year 1986**		
	Cases	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**	**Cases**	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**
All Cases	677	12	8 - 14	692	12	9 - 15
Cancer	7	71	20 - 81	20	45	23 - 66
Cerebrovascular Accidents	18	33	11 - 54	23	17	14 - 47
Gastrointestinal Catastrophes	7	14	18 - 74	4	50	5 - 82
Infectious Disease	4	75	13 - 87	7	43	11 - 75
Metabolic/Electrolyte Disorders	12	42	7 - 62	21	14	9 - 45
Pulmonary Disease	54	24	14 - 39	47	17	13 - 38
Renal Failure	3	100	9 - 84	2	50	6 - 95
Severe Acute Heart Disease	19	42	17 - 60	14	57	16 - 65
Severe Chronic Heart Disease	44	14	14 - 36	50	16	14 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	55	7	0 - 25	46	4	0 - 27
Gynecologic Disease	1	0	0 -100	6	0	0 - 98
Low-Risk Heart Disease	94	2	1 - 10	107	3	1 - 10
Musculoskeletal/Skin Conditions	81	1	1 - 10	64	2	0 - 14
Neuropsychiatric/Sensory Disease	21	0	0 - 38	12	8	0 - 98
Urologic Disease	47	4	0 - 41	41	0	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	101
Occupancy Rate (%):	57
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	65
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	13
Registered Nurses:	52
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

mc

Millcreek
Community
Hospital

5515 Peach Street, Erie, PA 16509 (814) 864-4031

Medicare Provider Number 39-0198

October 24, 1988

Health Standards and Quality Bureau, HCFA
Attention: Ms. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Ms. Kappert:

This letter is in response to the mortality information specific to Millcreek Community Hospital.

All of the following deaths specific to Millcreek Community Hospital fell within the range of predicted mortality rates. Deaths occurred in the following diagnostic categories:

DIAGNOSTIC CATEGORY	DEATHS	MORTALITY RATE	RANGE OF PREDICTED MORTALITY RATES
All Causes	677	12%	8-14%
Cancer	7	71%	20-81%
Cerebrovascular Accidents	18	33%	11-54%
Gastrointestinal Catastrophy	7	14%	18-74%
Infectious Diseases	4	75%	13-87%
Metabolic/Electrolyte Dist.	12	42%	7-62%
Pulmonary Diseases	54	24%	14-39%
Severe Acute Heart Disease	19	42%	17-60%
Severe Chronic Heart Disease	44	14%	14-36%
Gastrointestinal Disease	55	7%	0-25%
Gynecologic Disease	1	0%	0-100%
Low Risk Heart Disease	94	2%	1-10%
Musculoskeletal/Cutaneous Conditions	81	1%	1-10%
Neuropsychiatric/Sensory Disease	21	0%	0-38%
Urologic Disease	47	4%	0-41%

In one diagnostic category, Renal Failure, the hospital fell above the range for predicted mortality:

Renal Failure	3	100%	9-84%

In reviewing these cases, the following histories were noted:

- [redacted]
- [redacted]
- [redacted]

Thank you for the opportunity to respond.

Sincerely,

MILLCREEK COMMUNITY HOSPITAL

Mary Eckert

Mary L. Eckert
Executive Director

smw

MINERS HOSP OF NORTH CAMBRIA

CRAWFORD FIRST
SPANGLER, PA 15775

Medicare Hospital Provider Number: 390130

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	565	15	10 - 17	654	14	10 - 17
Cancer	6	33	12 - 77	6	67	17 - 82
Cerebrovascular Accidents	22	5	17 - 41	8	13	10 - 62
Gastrointestinal Catastrophes	2	100	12 - 97	4	25	10 - 84
Infectious Disease	7	14	11 - 68	7	29	14 - 76
Metabolic/Electrolyte Disorders	12	25	6 - 58	12	25	6 - 58
Pulmonary Disease	38	21	15 - 43	41	12	16 - 40
Renal Failure	3	33	7 - 90	2	100	11 - 98
Severe Acute Heart Disease	30	47	23 - 58	51	45	27 - 55
Severe Chronic Heart Disease	39	36	11 - 41	43	35	12 - 41
Severe Trauma	2	50	3 - 92	0	-	-
Gastrointestinal Disease	36	0	0 - 21	44	2	0 - 21
Gynecologic Disease	3	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	102	8	1 - 15	130	6	1 - 12
Musculoskeletal/Skin Conditions	40	2	1 - 18	52	2	1 - 15
Neuropsychiatric/Sensory Disease	16	0	0 - 90	9	0	0 -100
Urologic Disease	15	0	0 - 99	34	0	1 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 75
Occupancy Rate (%): 37
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: (not available)
Percent of Physicians Who Are Board Certified Specialists: (not available)
Interns and Residents: 0
Registered Nurses: 59
Licensed Practical Nurses: 5

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

MONONGAHELA VALLEY HOSPITAL INC

COUNTRY CLUB RD RT 88
MONONGAHELA, PA 15063

Medicare Hospital Provider Number: 390147

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,057	13	11 - 15	3,143	12	11 - 15
Cancer	101	45	32 - 56	121	48	38 - 61
Cerebrovascular Accidents	130	22	19 - 35	126	29	22 - 40
Gastrointestinal Catastrophes	20	60	17 - 61	35	37	19 - 54
Infectious Disease	28	50	23 - 61	39	41	21 - 55
Metabolic/Electrolyte Disorders	53	32	15 - 45	37	24	12 - 44
Pulmonary Disease	108	26	19 - 38	106	28	19 - 39
Renal Failure	22	68	22 - 74	13	38	15 - 75
Severe Acute Heart Disease	159	46	32 - 50	169	36	30 - 47
Severe Chronic Heart Disease	192	25	18 - 32	199	26	16 - 31
Severe Trauma	4	25	3 - 80	6	0	9 - 62
Gastrointestinal Disease	269	1	1 - 5	273	0	2 - 5
Gynecologic Disease	18	0	0 -100	22	5	0 -100
Low-Risk Heart Disease	447	3	2 - 6	444	3	2 - 6
Musculoskeletal/Skin Conditions	354	2	1 - 5	339	2	1 - 5
Neuropsychiatric/Sensory Disease	107	4	0 - 14	85	1	1 - 9
Urologic Disease	81	2	0 - 24	90	2	1 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	273
Occupancy Rate (%):	77
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	89
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	286
Licensed Practical Nurses:	36

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Monongahela
Valley
Hospital Inc.

Country Club Road
Monongahela, PA 15063
412-258-2000

Medicare Provider Number: 390147

October 18, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

The following are the comments prepared by Monongahela Valley Hospital, Inc. relating to the HCFA Mortality Data for 1987:

The information received from HCFA indicates that a total of 3,057 Medicare patients were admitted to Monongahela Valley Hospital in calendar year 1987 with a resultant mortality rate of 13%. However, hospital statistics indicate that there were 5,207 Medicare admissions during that time-frame and the recalculated mortality rate should actually be 7% (363 Medicare deaths divided by 5,207 Medicare patients). As was the case last year, this discrepancy presumably reflects multiple admissions of Medicare beneficiaries to our facility which HCFA has deleted from the calculations.

The following discrepancies were noted in the Hospital Characteristics section of the proposed data release:

	Incorrect HCFA Value	Corrected Data
Beds (#):	209	317
Total # of Physicians:	92	177
% of MDs Who Are Board Certified Specialists:	51%	67%
Organ Transplant Service:	Yes	No

After a detailed review and verification of the HCFA data, inaccurate information was identified on three (3) patients. A confidential listing of the revised patient-specific information is attached for your review. As a result of these changes, the mortality rate in the Low-Risk Heart Disease category should be decreased from 3% to 2%.

While Monongahela Valley Hospital was satisfied to note that our actual mortality rates fell within the range of the predicted mortality rates, it is again important to reiterate that mortality rates are not indicators of quality of care. The Hospital has effective ways of ensuring quality patient care. One such way is the monthly review of every death by the Chairmen of the Departments of Medicine and Surgery with the findings of this review being discussed at the monthly departmental meetings. Quality can only be evaluated through the peer review process and not through simplistic statistical comparisons such as mortality rates.

It is the Health Care Financing Administration's responsibility to release this information prudently as to avoid confusion and misguided apprehension among Medicare beneficiaries and the public in general. The misinterpretation of the data by the public would be a disservice to consumers and health care institutions.

Very truly yours,
Donna Ramusivich
DONNA L. RAMUSIVICH, RRA
Director of
Medical Support Services

DLR/lem

Attachment as stated.

MONSOUR MEDICAL CENTER

70 LINCOLN WAY E
JEANNETTE, PA 15644

Medicare Hospital Provider Number: 390103

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	791	7	7 - 12	902	8	8 - 13
Cancer	14	43	25 - 74	22	36	26 - 67
Cerebrovascular Accidents	27	30	14 - 49	32	25	13 - 44
Gastrointestinal Catastrophes	4	0	3 - 72	4	0	9 - 73
Infectious Disease	6	50	13 - 80	5	40	9 - 80
Metabolic/Electrolyte Disorders	8	13	4 - 61	9	11	9 - 59
Pulmonary Disease	34	3	17 - 35	34	21	16 - 45
Renal Failure	1	100	3 - 99	0	-	-
Severe Acute Heart Disease	16	50	17 - 63	18	56	20 - 64
Severe Chronic Heart Disease	36	14	18 - 42	45	11	14 - 35
Severe Trauma	0	-	-	1	0	0 -100
Gastrointestinal Disease	67	3	0 - 19	75	1	1 - 10
Gynecologic Disease	8	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	158	3	1 - 8	182	1	1 - 6
Musculoskeletal/Skin Conditions	102	2	0 - 11	92	0	1 - 6
Neuropsychiatric/Sensory Disease	25	4	0 - 89	18	0	0 - 83
Urologic Disease	18	0	0 - 70	27	0	0 - 52

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	233
Occupancy Rate (%):	41
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	85
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	14
Registered Nurses:	137
Licensed Practical Nurses:	38

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MONSOUR MEDICAL CENTER

70 LINCOLN WAY EAST • JEANNETTE, PENNSYLVANIA 15644 • 412 527-1511

October 20, 1988

Ms. Sandra Kappert
Health Standards and Quality Bureau
Meadows East Building 12-D-2
6325 Security Boulevard
Baltimore, MD 21207

Dear Ms. Kappert:

Enclosed you will find a portion of the patient identification data sent to us regarding mortality statistics. The patient marked in red was transferred to St. Francis Hospital where she expired on February 10, 1987. Due to the fact that the last hospital the patient was in was St. Francis, shouldn't this mortality be included in their data and deleted from ours?

In addition, I have enclosed a copy of the Medicare Hospital Mortality Information. I am responding to several discrepancies noted in the hospital characteristic section. I have a copy of the 1986 AHA report and our total number of beds is 233, not 170. This discrepancy causes the staffing per bed information to be inaccurate. Ownership/Control is reported as private, non-profit. The actual information reported was "other not-for-profit". Percent of Physicians who are board certified specialists is 78% since 66 out of 84 physicians are certified. And finally, we do have a coronary care unit. In the report this is documented as "Medical/Surgical Intensive Care (include mixed ICU/CCU)".

These corrections should be made prior to publication.

Sincerely,

Linda Bonacci

Linda Bonacci
Director Quality Review

LB:sjv

Enclosure

MONSOUR MEDICAL CENTER

70 LINCOLN WAY EAST • JEANNETTE, PENNSYLVANIA 15644 • 412 527-1511

COMMENT ON HCFA MORTALITY DATA

The data from HCFA indicates that 791 Medicare admissions occurred in 1987 while our own records indicate 1,622 Medicare admissions for this time period. This discrepancy is due to the fact that HCFA only includes the last admission for the patients admitted to the hospital more than once during the year. The data also indicates that there were 52 Medicare patients who expired within 30 days of admission to Monsour Medical Center in 1987. Our records indicate 51 Medicare patients expired within 30 days of admission to our hospital. A patient included in our mortality data was transferred to another facility and expired. A total of 47 patients expired while still a patient in the hospital and 4 patients expired after discharge.

In all of the diagnostic categories, except for one, renal failure, the hospital's actual mortality rate falls within or below the range for predicted mortality. In the category of renal failure one patient was admitted with a diagnosis listed in this category and expired, thus making our actual mortality rate 100%. This patient had multiple chronic medical problems and complications including cancer. The patient was ordered "no resuscitation" and death was not unexpected. After review of this case by the appropriate medical staff, patient care was deemed appropriate. Eighty-eight percent of the hospital's total mortalities were admitted through the emergency room and 46% were so severely ill that they required admission to intensive care. Of the total patients who expired within 30 days of admission, 69% were ordered "no resuscitation" on admission or shortly after admission. Additionally, 75% of the patients who expired had documented comorbidities and upon review of the medical records of all mortalities many had significant medical histories which may or may not have been included in the final diagnosis.

Of the four patients who died after discharge from the hospital, 3 were from high risk categories and were "no resuscitation" while admitted. Two of the patients were discharged to area nursing homes for continued care, and one patient was discharged to her daughter's home as requested by the patient with maximum services. Multiple comorbidities were present with these patients and death was not unexpected. The fourth patient was treated appropriately. The patient improved and was discharged in stable condition meeting all discharge screens and with appropriate discharge planning. The patient expired 17 days after discharge. It is impossible to assess the patient's course after discharge as this information is not in the medical record.

Several discrepancies have been noted in the "Hospital Characteristics" portion of the mortality information. Beds (#) indicates 170. Our 1986 AHA report documents 233 beds. The ownership/control states private, non-profit. The 1986 AHA report only indicates not for profit. Although "specialty services" indicates that we do not have a coronary care unit the 1986 AHA report states that we definitely do have a coronary care unit; i.e., "mixed ICU/CCU". Since the total beds are inaccurate, staff per bed is inaccurate also.

In conclusion, we would like to emphasize that this mortality data cannot solely be used to measure quality of care provided by any specific hospital. Assessing quality of care involves the review of many other elements that reach far beyond the limited information included in this mortality information.

MONTEFIORE HOSPITAL

3459 FIFTH AVE
PITTSBURGH, PA 15213

Medicare Hospital Provider Number: 390229

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,939	13	11 - 15	3,075	13	12 - 16
Cancer	153	36	32 - 53	187	33	31 - 50
Cerebrovascular Accidents	99	26	18 - 37	110	25	19 - 37
Gastrointestinal Catastrophes	22	36	13 - 55	25	36	17 - 57
Infectious Disease	40	35	20 - 52	64	56	25 - 54
Metabolic/Electrolyte Disorders	63	24	11 - 39	64	22	15 - 42
Pulmonary Disease	106	35	18 - 39	136	43	20 - 40
Renal Failure	19	47	16 - 71	15	67	20 - 77
Severe Acute Heart Disease	143	41	32 - 50	154	31	34 - 51
Severe Chronic Heart Disease	170	20	18 - 32	159	16	20 - 33
Severe Trauma	9	33	5 - 66	7	29	5 - 70
Gastrointestinal Disease	172	3	1 - 8	181	1	2 - 6
Gynecologic Disease	6	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	290	3	2 - 7	284	3	2 - 7
Musculoskeletal/Skin Conditions	370	3	1 - 6	368	2	1 - 5
Neuropsychiatric/Sensory Disease	109	2	1 - 10	116	3	1 - 11
Urologic Disease	144	0	0 - 6	94	0	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	406
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

Bringing Care & Science to Life **Montefiore Hospital**

Corporate Member and Teaching Hospital
University Health Center of Pittsburgh

3459 Fifth Avenue
Pittsburgh, Pennsylvania 15213
(412)648-6000

Medicare Provider Number: 390229

October 19, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Although Montefiore Hospital's mortality rates for 1987 fell within the predicted range for all causes and for each designated diagnostic group, we continue to believe that the released data is not a valid basis for healthcare consumers to make judgements about the quality of care at hospitals.

Providing information to enable consumers to make informed decisions is a laudable goal, but releasing flawed and possibly misleading information subverts the stated intention. HCFA's failure to include severity of patient conditions necessarily invalidates its results as surely as cost-of-living statistics would be if they omitted the cost of food.

Severity is a particularly important factor for hospitals such as Montefiore, because an inner-city location coupled with university-teaching and tertiary-care missions results in a patient mix with very high severity of illness. We stress this even though our mortality rates were entirely within the predicted range. Furthermore, no statistical methodology has been validated as a predictor of quality.

Public perception, aside from technical analysis, may be further distorted by HCFA's decision to relegate corrections of factual material to footnotes. While making such corrections in the main text would be time consuming, genuine concern for the public's right to know should include a production schedule that allowed for accuracy on first reference. Our concern is substantive. For example, under HCFA's published Hospital Characteristics for Montefiore, the indicated total number of physicians and percentage that are board certified are incorrect; 398 and 75%, respectively, are the correct figures. Furthermore, the entries for Speciality Services are incorrect. In fact, Montefiore is one of the major Bone Marrow Transplant Centers, offers extensive Coronary Care services, as well as Neuro-Intensive Care, Medical Intensive Care and Surgical Intensive Care units, Lithotripsy and NMR diagnostic services. Other errors are discussed below.

We note that applying 1987 methodology to 1986 statistics places Montefiore's mortality rate for Severe Trauma within the predicted range. Deaths due to Pulmonary Disease fall above the predicted range for 1986 and at the upper end of the range for 1987. For this reason, the Hospital chose to carefully review all admissions in this category to determine characteristics of these patients and the type of care rendered which would put them statistically above the "average." This review revealed that over half of these patients fell into DRG 079, which includes severely infectious, complicated

(more)

Pneumonias. Coupling this diagnosis with an elderly nursing home resident (68% were admitted from extended care facilities) who is compromised by other disease verifies that deaths for these patients were "expected" rather than resulting from poor treatment plans.

An overall picture of the typical patient in this category (Pulmonary Disease) revealed an octogenarian (average age 81) transferred to Montefiore's Emergency Room from an extended care facility with a diagnosis of pneumonia. The patients typically were compromised by other pulmonary disease, such as COPD and Emphysema. Additionally, other concurrent diagnoses included Cardiovascular Disease, Diabetes and Cancer. Fifty-one percent of the patients had DNR orders written at the time of their admission evaluation. Omission of DNR patient status further compromises HCFA's methodology.

Other errors of basic fact in HCFA statistics include five errors in patients' age. Furthermore, HCFA reported one patient as dying the day after discharge when, in fact, the patient died at Montefiore Hospital.

In closing, I must emphasize the fact that mortality rates, even if more inclusively analytic and accurately based than this year's release, cannot by themselves measure quality. Statistical methods cannot predict medical outcome when medical science itself can not predict outcome. Health care is not and should not be limited to only those cases where the odds of success are good.

This hospital's mission, which includes its commitment to patient care, education and research, provides a truer basis on which to assess quality through its own internal quality assurance function.

Sincerely,

Irwin Goldberg

Irwin Goldberg
President,
Montefiore Hospital

/MK

MONTOGOMERY HOSP

POWELL FORANCE STS
NORRISTOWN, PA 19401

Medicare Hospital Provider Number: 390108

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,783	12	10 - 14	1,795	13	10 - 15
Cancer	81	40	31 - 56	86	45	34 - 59
Cerebrovascular Accidents	62	31	16 - 40	59	17	17 - 38
Gastrointestinal Catastrophes	20	35	18 - 61	19	47	16 - 61
Infectious Disease	24	29	16 - 55	23	43	17 - 58
Metabolic/Electrolyte Disorders	26	23	8 - 46	28	29	8 - 46
Pulmonary Disease	72	25	18 - 40	68	24	15 - 38
Renal Failure	10	10	13 - 68	6	0	8 - 68
Severe Acute Heart Disease	69	45	28 - 53	73	52	28 - 52
Severe Chronic Heart Disease	83	17	16 - 33	96	22	16 - 34
Severe Trauma	6	17	5 - 69	2	50	1 - 92
Gastrointestinal Disease	123	3	1 - 10	100	6	1 - 14
Gynecologic Disease	15	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	191	3	1 - 8	236	6	1 - 9
Musculoskeletal/Skin Conditions	222	0	1 - 5	224	2	1 - 6
Neuropsychiatric/Sensory Disease	46	4	0 - 29	55	4	0 - 24
Urologic Disease	100	3	0 - 20	80	4	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	259
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	203
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	15
Registered Nurses:	259
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

MONTROSE GENERAL HOSP INC

1-3 GROW AVE
MONTROSE, PA 18801

Medicare Hospital Provider Number: 390249

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	275	18	9 - 19	307	12	9 - 17
Cancer	7	100	26 - 71	4	75	10 - 84
Cerebrovascular Accidents	15	40	9 - 57	16	25	10 - 53
Gastrointestinal Catastrophes	3	67	10 - 90	3	33	5 - 86
Infectious Disease	0	-	-	1	0	1 - 97
Metabolic/Electrolyte Disorders	5	40	3 - 78	5	20	10 - 78
Pulmonary Disease	12	25	14 - 62	26	12	12 - 40
Renal Failure	1	100	3 -100	0	-	-
Severe Acute Heart Disease	15	53	17 - 65	12	42	19 - 70
Severe Chronic Heart Disease	16	38	6 - 53	24	25	10 - 46
Severe Trauma	1	100	2 - 97	0	-	-
Gastrointestinal Disease	33	3	1 - 25	32	6	0 - 39
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	34	0	1 - 17	32	3	0 - 28
Musculoskeletal/Skin Conditions	27	4	0 - 81	27	7	0 - 79
Neuropsychiatric/Sensory Disease	10	0	0 -100	12	0	0 -100
Urologic Disease	3	0	0 -100	4	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	39
Occupancy Rate (%):	36
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	0
Registered Nurses:	38
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MOSES TAYLOR HOSP

700 QUINCY AVE
SCRANTON, PA 18510

Medicare Hospital Provider Number: 390119

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,177	11	10 - 14	2,189	11	10 - 15
Cancer	58	29	26 - 52	66	41	26 - 53
Cerebrovascular Accidents	91	29	19 - 39	84	30	17 - 38
Gastrointestinal Catastrophes	18	50	14 - 60	17	41	12 - 60
Infectious Disease	38	32	24 - 56	42	21	23 - 52
Metabolic/Electrolyte Disorders	37	22	16 - 48	29	17	8 - 42
Pulmonary Disease	77	21	16 - 37	82	20	15 - 36
Renal Failure	23	48	16 - 69	39	49	20 - 70
Severe Acute Heart Disease	86	38	30 - 53	108	48	28 - 49
Severe Chronic Heart Disease	120	17	16 - 31	137	21	15 - 31
Severe Trauma	6	50	6 - 75	3	67	8 - 89
Gastrointestinal Disease	175	4	1 - 9	197	3	1 - 7
Gynecologic Disease	11	0	0 -100	16	6	0 -100
Low-Risk Heart Disease	260	2	2 - 6	273	3	2 - 7
Musculoskeletal/Skin Conditions	250	2	1 - 6	213	0	1 - 5
Neuropsychiatric/Sensory Disease	47	0	0 - 16	72	1	0 - 14
Urologic Disease	96	1	0 - 12	98	1	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	262
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	109
Percent of Physicians Who Are Board Certified Specialists:	84
Interns and Residents:	0
Registered Nurses:	206
Licensed Practical Nurses:	98

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Although Moses Taylor Hospital's actual mortality rates fall within the predicted mortality range for all 17 of the Health Care Financing Administration's (HCFA) diagnostic categories, the hospital remains concerned about the methodology HCFA employs in developing its mortality data.

HCFA'S mortality analysis lacks specific clinical data on the severity of illness of individual patients, such as how ill the patient was at time of admission to the hospital, or whether the patient had a terminal illness. Hospitals that treat large numbers of severely ill patients, with significant complicating conditions, may therefore exhibit mortality rates that are higher than predicted due to the lack of severity measures.

HCFA's mortality analysis also fails to take into account the fact that the patients many hospitals treat are not "average."

For example, Moses Taylor Hospital's patient mix includes an unusually large number of Medicare-age patients, representing approximately 56 per cent of all discharges. Furthermore, Moses Taylor Hospital's review of its 1987 Medicare admissions reveals that 72 per cent of these patients were age 70 or older and 29 per cent were age 80 or older.

The HCFA methodology makes no provision for these types of unusual patient mixes.

The HCFA analysis also fails to take into account the fact that some hospitals serve their communities as regional referral centers for severely or acutely ill patients. Moses Taylor Hospital, for example, is a regional center for the treatment of end stage renal disease, and as such receives referrals of severely ill renal patients from other institutions.

-more-

The HCFA analysis makes no provision for hospitals like Moses Taylor which offer these types of specialized programs for the severely ill.

Moses Taylor Hospital is committed to providing quality care. Every death that occurs at Moses Taylor Hospital is reviewed by a medical staff peer review committee to determine if the best possible care was rendered. If any problems are identified, steps are immediately taken to remedy these problems.

Moses Taylor Hospital will continue to take any and all actions necessary to ensure the provision of the highest quality of care.

-end-

MUHLENBERG MEDICAL CTR

SCHOENERSVILLE RD
BETHLEHEM, PA 18017

Medicare Hospital Provider Number: 390263

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,217	10	9 - 14	1,258	11	9 - 14
Cancer	24	46	25 - 65	29	34	24 - 60
Cerebrovascular Accidents	55	24	17 - 41	45	29	14 - 42
Gastrointestinal Catastrophes	19	53	12 - 58	12	50	15 - 68
Infectious Disease	33	33	18 - 53	21	24	19 - 58
Metabolic/Electrolyte Disorders	21	19	6 - 46	35	23	11 - 44
Pulmonary Disease	67	21	16 - 38	80	22	17 - 39
Renal Failure	7	29	9 - 76	6	83	17 - 84
Severe Acute Heart Disease	41	24	25 - 53	52	38	27 - 54
Severe Chronic Heart Disease	53	23	11 - 35	50	16	14 - 36
Severe Trauma	2	0	1 - 91	1	0	0 - 99
Gastrointestinal Disease	97	2	2 - 10	99	4	0 - 13
Gynecologic Disease	3	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	127	0	2 - 5	136	4	1 - 9
Musculoskeletal/Skin Conditions	190	2	0 - 7	191	2	1 - 6
Neuropsychiatric/Sensory Disease	45	0	1 - 12	37	3	0 - 44
Urologic Disease	33	0	0 - 47	32	3	0 - 34

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	148
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	164
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	0
Registered Nurses:	138
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MUHLENBERG
HOSPITAL CENTER

October 18, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

ATTENTION: Mrs. Sandra Kappert

Re: Medicare Provider #39-0263

Dear Dr. Roper:

I wish to thank you for the opportunity to review and provide comment on the mortality information which the Health Care Finance Administration (HCFA) plans to release in December 1988.

I would like to provide you with the following corrections to the Hospital Characteristics included in the Medicare Hospital Mortality Information:

Beds (#): Total 148 - 104 medical/surgical; 36 psychiatric; 8 ICCU
Occupancy Rate (%): 73%

Total Number of Active Physicians: 151
Percent of Physicians who are
Board Certified Specialists: 66.2%
Coronary Care Unit: Yes

With respect to the Mortality Data itself, I feel it is important to note that Muhlenberg Hospital Center has a comprehensive, on-going, hospital-wide Quality Assurance program to monitor and evaluate the quality and appropriateness of patient care services provided. One aspect of this concurrent process is Mortality Review.

Members of Muhlenberg Hospital Center's Medical Staff have conducted an in-depth, retrospective, case-by-case analysis of HCFA's mortality data. This review indicates that the hospital's mortality rates fall well within the predicted ranges and the standard of care was appropriate in all cases.

Schoenersville Rd. • Bethlehem, PA 18017 • 215-861-2200

Over the course of the past year, efforts have been directed towards the implementation of the Medisgroups Patient Severity indexing system. We anticipate this system will provide the hospital with more meaningful data and augment existing review processes.

The Board of Trustees, Administration, and Medical Staff of Muhlenberg Hospital Center intend to continue comprehensive quality assurance activities, as well as, support cost containment efforts. We would hope that HCFA will work with hospitals to provide the public with meaningful information on which to base their health care decisions.

Very truly yours,

William R. Mason
President

WRM:ts

MUNCY VALLEY HOSP

P O BOX 340
MUNCY, PA 17756

Medicare Hospital Provider Number: 390078

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	590	12	9 - 16	569	10	9 - 15
Cancer	7	57	18 - 82	9	44	19 - 77
Cerebrovascular Accidents	25	32	12 - 48	17	35	9 - 54
Gastrointestinal Catastrophes	3	100	14 - 86	6	67	10 - 77
Infectious Disease	9	11	14 - 63	3	0	7 - 80
Metabolic/Electrolyte Disorders	6	17	8 - 70	6	17	2 - 71
Pulmonary Disease	47	17	13 - 38	45	11	15 - 37
Renal Failure	6	33	16 - 86	4	75	13 - 89
Severe Acute Heart Disease	21	43	21 - 62	31	29	20 - 53
Severe Chronic Heart Disease	38	32	13 - 43	29	24	11 - 43
Severe Trauma	2	0	2 - 89	0	-	-
Gastrointestinal Disease	63	5	1 - 19	51	6	1 - 22
Gynecologic Disease	3	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	90	1	1 - 8	100	1	2 - 8
Musculoskeletal/Skin Conditions	55	2	1 - 14	45	2	0 - 28
Neuropsychiatric/Sensory Disease	16	0	0 - 55	13	0	0 - 46
Urologic Disease	22	0	0 - 39	25	0	0 - 61

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 129
Occupancy Rate (%): 67
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 21
Percent of Physicians Who Are Board Certified Specialists: 62
Interns and Residents: 0
Registered Nurses: 31
Licensed Practical Nurses: 17

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

Provider Nr.- 39-0078

Muncy Valley Hospital

Muncy Valley Hospital is in full agreement that the consumer needs to be aware of the availability of health care services, as well as the quality of such services, but firmly believes that this information must be sufficiently accurate for them to make intelligent decisions on where to go for medical treatment.

Unfortunately, the HCFA data has the potential for misleading the consumer into possibly misjudging a hospital's quality of care on the basis of a statistical analysis that even the issuing agency admits should not be used as the sole basis for measuring quality of care. Specifically, all of the HCFA data was based on the patient's principal diagnosis which we found to be different than the actual cause of death in many of the cases at Muncy Valley Hospital, which clearly invalidates the survey.

Muncy Valley Hospital is additionally concerned that the statistical model used by HCFA did not take into consideration a wide range of factors which have a significant impact on mortality, such as:

- The severity of a patient's illness at time of admission
- A known terminal illness situation
- Transfer from a nursing home (higher risk; comorbid condition)
- Prior treatment received before admission
- Patient's age upon admission
- Trauma admission through Emergency Department

Of all the hospital's actual mortalities, most fell under one of three categories, all of which were known mortality risks at the time of the admission. They include:

A. Cases where the family advised not to resuscitate or take any extra measures to sustain life.
B. Cases where the family or patient refused further treatment.
C. Cases where death was fully expected by the family at the time of admission.

Muncy Valley Hospital conducts continuous and thorough quality assessment programs for services provided by the Medical Staff and the clinical service departments. These programs meet the standards established by all the appropriate local, state, and national accrediting organizations relevant to the provision of health care, which includes the Joint Commission on Accreditation of Healthcare Organizations and the Pennsylvania Department of Health.

JDH:alg
HCFAMS

Tel. 717/546-8282
215 East Water Street, Muncy, Pennsylvania 17756

NANTICOKE STATE GENERAL HOSP

W WASHINGTON ST
NANTICOKE, PA 18634

Medicare Hospital Provider Number: 390186

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	520	10	8 - 15	525	15	8 - 15
Cancer	5	40	14 - 85	5	40	9 - 80
Cerebrovascular Accidents	23	22	13 - 48	25	16	15 - 46
Gastrointestinal Catastrophes	1	0	0 - 99	0	-	-
Infectious Disease	3	33	3 - 86	3	0	4 - 79
Metabolic/Electrolyte Disorders	15	7	10 - 46	10	30	5 - 62
Pulmonary Disease	18	17	14 - 51	24	25	10 - 47
Renal Failure	1	0	3 - 99	0	-	-
Severe Acute Heart Disease	21	33	14 - 54	29	55	22 - 58
Severe Chronic Heart Disease	45	22	10 - 36	38	34	10 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	35	0	1 - 16	43	7	0 - 44
Gynecologic Disease	7	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	100	4	1 - 11	79	4	0 - 17
Musculoskeletal/Skin Conditions	37	0	0 - 17	42	2	0 - 30
Neuropsychiatric/Sensory Disease	4	0	0 -100	12	0	0 -100
Urologic Disease	22	5	0 - 91	24	0	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	76
Occupancy Rate (%):	57
Ownership/Control:	State Government

STAFFING

Total Number of Physicians:	41
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	0
Registered Nurses:	56
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
NANTICOKE STATE GENERAL HOSPITAL
Nanticoke, Pennsylvania 18634-3198

TELEPHONE
AREA CODE 717, 735-5000

October 25, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

In reviewing the mortality data as reported by the Health Care Financing Administration for calendar year 1987, we found our actual mortality rates per diagnostic category to be well within the ranges for predicted mortality. In comparing 1986 to 1987 data, we found an overall positive trend.

I do have a concern regarding our Hospital Characteristics as noted on the summary because the information is dated. If 1987 AHA survey data were utilized for the 1987 mortality data, our bed size and occupancy rate would be different. Also under staffing, the physician and registered nurse figures would also differ. I have recently received correspondence from the Hospital Association of Pennsylvania which indicated the HCFA December public release will utilize the 1987 AHA survey data. This raises a question, given the forthcoming change, on how the "range for predicted mortality" would change, if at all? I'd appreciate it very much if you could respond to this question prior to the December public release.

Sincerely,

Kenneth R. Getz
Administrator

KRG/msl

NASON HOSP

NASON DRIVE
ROARING SPRINGS, PA 16673

Medicare Hospital Provider Number: 390062

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	686	14	9 - 15	740	14	9 - 15
Cancer	19	63	21 - 64	17	35	25 - 70
Cerebrovascular Accidents	26	35	10 - 47	34	24	16 - 46
Gastrointestinal Catastrophes	6	17	12 - 74	9	33	15 - 73
Infectious Disease	6	33	6 - 74	5	60	6 - 78
Metabolic/Electrolyte Disorders	8	13	6 - 61	7	14	8 - 66
Pulmonary Disease	34	32	14 - 47	38	45	16 - 48
Renal Failure	2	100	4 - 89	2	100	11 - 97
Severe Acute Heart Disease	36	39	21 - 53	47	34	22 - 50
Severe Chronic Heart Disease	29	28	8 - 42	27	37	9 - 46
Severe Trauma	1	0	1 - 97	2	50	2 - 92
Gastrointestinal Disease	50	6	0 - 25	58	3	0 - 22
Gynecologic Disease	13	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	116	4	1 - 11	87	5	0 - 15
Musculoskeletal/Skin Conditions	57	7	0 - 31	63	2	1 - 12
Neuropsychiatric/Sensory Disease	10	0	0 -100	22	0	0 - 40
Urologic Disease	39	0	0 - 24	52	0	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	74
Occupancy Rate (%):	48
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	38
Percent of Physicians Who Are Board Certified Specialists:	61
Interns and Residents:	0
Registered Nurses:	75
Licensed Practical Nurses:	26

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NAZARETH HOSP

2601 HOLME AVE
PHILADELPHIA, PA 19152

Medicare Hospital Provider Number: 390204

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,205	14	12 - 16	3,515	12	11 - 15
Cancer	134	49	34 - 55	138	54	36 - 58
Cerebrovascular Accidents	195	33	19 - 34	159	21	19 - 35
Gastrointestinal Catastrophes	36	28	20 - 54	37	22	22 - 54
Infectious Disease	40	32	22 - 54	58	28	23 - 51
Metabolic/Electrolyte Disorders	58	33	15 - 44	69	26	11 - 38
Pulmonary Disease	145	28	19 - 37	137	20	19 - 36
Renal Failure	6	33	8 - 79	15	47	18 - 76
Severe Acute Heart Disease	208	28	31 - 47	211	31	31 - 46
Severe Chronic Heart Disease	232	21	19 - 31	203	21	18 - 31
Severe Trauma	6	33	6 - 74	7	43	7 - 73
Gastrointestinal Disease	169	2	2 - 7	208	3	2 - 8
Gynecologic Disease	30	0	0 - 94	24	0	0 -100
Low-Risk Heart Disease	505	2	2 - 5	597	4	2 - 6
Musculoskeletal/Skin Conditions	315	3	1 - 7	363	2	1 - 5
Neuropsychiatric/Sensory Disease	134	3	1 - 9	165	2	1 - 8
Urologic Disease	92	1	0 - 11	97	0	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 296
Occupancy Rate (%): 76
Ownership/Control: Church

STAFFING

Total Number of Physicians: 233
Percent of Physicians Who Are Board Certified Specialists: 78
Interns and Residents: 0
Registered Nurses: 279
Licensed Practical Nurses: 144

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

NAZARETH HOSPITAL

2601 HOLME AVENUE • PHILADELPHIA, PA. 19152
335-6000

October 21, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health & Human Services
Baltimore, Maryland 21207

Dear Doctor Roper:

Enclosed, please find comments based on a review of statistical data supplied to us in your September 15, 1988 submission of mortality data.

We hope this information sheds some meaningful light on an interpretation of our statistics.

Sincerely yours,

Sister M. Therese

Sister M. Therese
President

Carl J Hoffman MD

Carl J. Hoffman, M.D.
Director of Medical Affairs

SMT/do
Enclosure

NAZARETH HOSPITAL

2601 HOLME AVENUE • PHILADELPHIA, PA. 19152
335-6000

Medicare Provider Number
390204

Overall review indicates that all mortalities fall within the predicted range. The accuracy of the data is presumed although the presumption is based on last years verification in which only one or two inaccuracies were found of an insignificant nature.

We chose to look at those categories in which our experience increased most significantly over last years experience. The only category with a significant number of cases in which last years criteria for review (more than twice the minimal expected rate) was present was metabolic and electrolyte disturbance. We thought that review of changing experience would be more meaningful. The four categories: CVA, Gastrointestinal Catastrophies, Pulmonary Disease and Metabolic Disturbances exhibited 12%, 6%, 8% and 7% increases respectively. Of these, only CVA exceeds the mean of the predicted range.

When adjusting for changes in the expected rates, the relative rates for CVA (12%), Pulmonary Disease (8%) and, at 8%, Gastrointestinal Catastrophies became the categories with the highest percentage change. These categories were chosen for review.

Patterns will be evaluated and where appropriate, in depth case review initiated.

This hospital serves several nursing homes and continues to maintain an oncology unit serving the northeast section of the city. The oncology unit serves a high number of palliative and terminal patients and the rate is the only rate other than CVA exceeding the mean of the predicted range.

NESBITT MEMORIAL HOSPITAL

562 WYOMING AVENUE
KINGSTON, PA 18704

Medicare Hospital Provider Number: 390137

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,194	12	9 - 13	2,235	11	8 - 13
Cancer	52	33	22 - 51	39	36	20 - 53
Cerebrovascular Accidents	107	27	16 - 35	102	25	17 - 36
Gastrointestinal Catastrophes	9	33	11 - 69	7	57	12 - 76
Infectious Disease	31	42	18 - 55	17	35	12 - 58
Metabolic/Electrolyte Disorders	33	52	10 - 48	35	23	11 - 44
Pulmonary Disease	99	19	18 - 37	83	17	15 - 35
Renal Failure	13	46	11 - 71	4	75	5 - 83
Severe Acute Heart Disease	86	38	24 - 47	88	45	26 - 49
Severe Chronic Heart Disease	139	25	14 - 30	183	26	15 - 30
Severe Trauma	1	0	0 - 98	9	11	8 - 60
Gastrointestinal Disease	149	2	1 - 8	145	4	1 - 10
Gynecologic Disease	14	0	0 -100	26	0	0 -100
Low-Risk Heart Disease	318	3	1 - 6	307	5	1 - 7
Musculoskeletal/Skin Conditions	198	1	1 - 6	217	3	0 - 8
Neuropsychiatric/Sensory Disease	51	4	0 - 54	61	0	0 - 14
Urologic Disease	122	1	0 - 10	104	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	214
Occupancy Rate (%):	81
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	200
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	247
Licensed Practical Nurses:	51

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Nesbitt Memorial Hospital
EST. 1912

October 20, 1988

Health Standards and Quality Bureau
HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert: **HOSPITAL ID: 390137**

In regard to the 1988 release of the 1987 mortality information, we at Nesbitt Memorial Hospital feel the information you will be releasing is virtually meaningless. Our main concern has not changed from last year in that deaths occurring outside of the hospital are included in the hospital's mortality information, whether or not these deaths are related to the hospitalization. These "outside" deaths make the statistical information worthless and non-verifiable on the part of the Hospital, and could very well be misleading to the general public by increasing the mortality percentage.

To be specific, (1) for Calendar Year 1987, the Nesbitt Memorial Hospital actual mortality rate for all causes was 12%, or 2,194 deaths. Of these deaths, ONLY 306 OCCURRED IN THE HOSPITAL; a full 87% of the deaths occurred outside the hospital yet they are included in the statistics. We find this extremely misleading. Specifically (2) the Hospital did have one diagnostic code in which the Hospital exceeded the predicted range of mortality (metabolic/electrolyte disturbances). The statistics show 33 deaths at Nesbitt Memorial Hospital when in reality, only 15 occurred in the hospital and all but two were expected to die at the time of admission (13 patients had "Do No Resuscitate" orders). This number could possibly make the Hospital look bad in the eyes of the public, yet a simple explanation shows the numbers to be misleading.

Although we do not object to sharing quality of care information with the general public, we feel the information should be meaningful and accurate. For the second year, this information fails to meet this test.

Sincerely,

Kevin M. Ross
Associate Administrator

KMR:ml

562 Wyoming Avenue • Kingston, PA 18704 • (717) 288-1411

NORTH HILLS PASSAVANT HOSPITAL

9100 BABCOCK BOULEVARD
PITTSBURGH, PA 15237

Medicare Hospital Provider Number: 390107

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,199	10	10 - 14	3,247	11	10 - 14
Cancer	113	34	31 - 53	114	41	31 - 54
Cerebrovascular Accidents	128	25	19 - 36	120	27	21 - 39
Gastrointestinal Catastrophes	21	29	17 - 58	21	24	19 - 58
Infectious Disease	20	35	15 - 57	17	29	18 - 62
Metabolic/Electrolyte Disorders	34	12	12 - 41	40	32	10 - 44
Pulmonary Disease	102	20	17 - 35	122	28	20 - 39
Renal Failure	14	50	19 - 78	16	31	21 - 77
Severe Acute Heart Disease	155	34	32 - 50	158	36	32 - 50
Severe Chronic Heart Disease	178	20	18 - 32	172	22	16 - 31
Severe Trauma	3	33	2 - 87	6	0	5 - 60
Gastrointestinal Disease	279	4	2 - 8	292	1	2 - 6
Gynecologic Disease	38	0	0 -100	31	0	0 -100
Low-Risk Heart Disease	416	2	2 - 6	395	4	2 - 7
Musculoskeletal/Skin Conditions	326	2	1 - 6	301	3	1 - 6
Neuropsychiatric/Sensory Disease	100	3	1 - 11	113	2	1 - 9
Urologic Disease	84	0	0 - 8	98	0	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	292
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	250
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	355
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NORTH HILLS
PASSAVANT HOSPITAL

9100 BABCOCK BLVD.
PITTSBURGH, PA 15237-5842
412/367-6700
TELFAX 412/367-4776

GEORGE R. SHIFLER
CHAIRMAN
WILLIAM P. KOUGHAN
PRESIDENT

October 20, 1988

Mr. William L. Roper, Administrator
Health Care Financing Administration
Health Standards & Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Medicare Provider #39-0107

Dear Mr. Roper:

The Health Care Financing Administration Mortality Data has been reviewed by representatives of our Professional Staff, the Department of Quality Assurance and Administration. We are gratified to find that our statistics are well within the predictable mortality ranges as established by your agency. However, we are resolute in our belief that your statistical model is simply one indicator of potential quality distinctions among hospitals and physicians.

It is important that we place in the record numerous facts that relate to our hospital and should be considered by you for the purpose of evaluating quality of care rather than analyzing statistics.

A. Twenty-one percent of the deaths attributed to our institution died elsewhere. It is not possible to evaluate quality without knowledge of cause of death.

B. North Hills Passavant Hospital is ringed with personal care homes, several large nursing homes and a county hospital for Medicare and Medicaid patients. A high number of very ill patients from those facilities are admitted to North Hills Passavant Hospital. These patients usually have more than one comorbid condition which contributes to their poor medical condition.

C. A sample of deaths revealed that 28% had requested that no aggressive measures be initiated.

There are also changes needed in the Hospital's characteristics that have been reported with the mortality information. Either through typographical errors or hospital expansion, some statistics are incorrect.

> Our beds total 292, not 227.
>
> Total number of physicians is 309, 72% of whom are board certified specialists rather than your numbers of 301 physicians - 53% of those certified.
>
> Registered Nurses per bed is 1.41 not 1.48.
>
> Licensed Practical Nurses are .19 not .21.
>
> We do have a Coronary Care Unit and have had since the early 1970's.
>
> Corneal transplants are done at North Hills Passavant, but we do not consider ourselves an organ transplant hospital as your records indicate.

Statistically, our results are acceptable. However, we must urge you to improve your methodology to include consideration to assess the patient's severity and acuity of his illness.

We will continue to review the quality of care in our hospital using every means available, and not relying solely on statistical measures. The patient, as always, is our primary concern.

Sincerely,

Stephen H. Spargo
Vice President of Finance

SHS:dlg

NORTH PENN HOSP

MEDICAL CAMPUS DRIVE
LANSDALE, PA 19446

Medicare Hospital Provider Number: 390012

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,457	14	11 - 16	1,352	14	11 - 16
Cancer	50	48	28 - 58	43	49	29 - 61
Cerebrovascular Accidents	68	26	19 - 41	68	31	17 - 41
Gastrointestinal Catastrophes	20	35	19 - 62	17	47	14 - 62
Infectious Disease	7	14	10 - 67	16	38	21 - 68
Metabolic/Electrolyte Disorders	31	16	9 - 41	20	25	8 - 50
Pulmonary Disease	120	27	21 - 40	80	36	18 - 41
Renal Failure	5	60	14 - 88	4	50	5 - 84
Severe Acute Heart Disease	69	36	27 - 51	66	44	28 - 54
Severe Chronic Heart Disease	78	31	15 - 36	70	21	15 - 36
Severe Trauma	2	0	4 - 89	3	100	7 - 81
Gastrointestinal Disease	96	3	1 - 12	91	5	1 - 14
Gynecologic Disease	13	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	139	3	1 - 9	127	6	1 - 12
Musculoskeletal/Skin Conditions	118	4	1 - 11	132	0	1 - 5
Neuropsychiatric/Sensory Disease	74	3	0 - 15	100	2	1 - 10
Urologic Disease	51	0	0 - 13	49	2	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 150
Occupancy Rate (%): 61
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 132
Percent of Physicians Who Are Board Certified Specialists: 83
Interns and Residents: 0
Registered Nurses: 150
Licensed Practical Nurses: 17

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

North Penn Hospital

100 Medical Campus Drive
Lansdale, PA 19446 • (215) 368-2100

Provider #390012

HCFA 1987 Mortality Data Release

North Penn Hospital welcomes the release of useful, valid information to consumers to aid them in choosing appropriate, high quality health care. It should be emphasized that the use of mortality statistics alone is not a sound means to evaluate any hospital. The mortality data do not take into account severity of illness and record data only for Medicare patients. Patients in this population are not only elderly, but often have a number of debilitating conditions which complicate their care and affect the outcome of their hospitalization.

The trustees, management and medical staff of North Penn Hospital are committed to providing a high level of care to all patients. In cooperation with the many accrediting bodies in the hospital industry, including the Joint Commission on Accreditation of Healthcare Organizations and the Pennsylvania Department of Health, we maintain an extensive quality assurance program. The review of mortalities is only part of this program.

This year selected hospital characteristics have been published from the American Hospital Association Guide to the Health Care Field. The information provided to hospitals along with the mortality statistics is from the 1986 edition; HCFA has indicated that these will be replaced with the 1987 data. It is, therefore, not possible to respond to the actual data to be presented. However, a review of the 1986 data extracted by HCFA uncovers some inaccuracies. The hospital is equipped with a combined Intensive Care/Coronary Care Unit and therefore, does provide sophisticated care to cardiac patients. The hospital also provides hospice care but not in specified beds.

North Penn Hospital will continue its efforts to provide the highest quality health care and will monitor the effectiveness of its programs regardless of future data releases.

NORTHEASTERN HOSP

2301 E ALLEGHENY AVE
PHILADELPHIA, PA 19134

Medicare Hospital Provider Number: 390126

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,840	10	10 - 14	1,919	10	10 - 14
Cancer	71	39	26 - 52	80	35	29 - 54
Cerebrovascular Accidents	81	17	17 - 36	76	20	15 - 35
Gastrointestinal Catastrophes	25	28	13 - 52	22	36	23 - 65
Infectious Disease	25	36	23 - 61	12	33	16 - 67
Metabolic/Electrolyte Disorders	33	33	13 - 49	28	25	7 - 44
Pulmonary Disease	58	17	12 - 34	78	24	17 - 39
Renal Failure	4	50	3 - 84	5	60	6 - 81
Severe Acute Heart Disease	83	33	24 - 46	100	33	28 - 48
Severe Chronic Heart Disease	126	15	15 - 29	107	23	14 - 32
Severe Trauma	7	14	5 - 65	4	25	1 - 84
Gastrointestinal Disease	99	0	2 - 7	117	3	1 - 10
Gynecologic Disease	11	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	267	2	1 - 6	310	2	2 - 6
Musculoskeletal/Skin Conditions	158	4	1 - 10	157	1	1 - 6
Neuropsychiatric/Sensory Disease	62	2	0 - 17	80	1	0 - 13
Urologic Disease	72	3	0 - 20	78	4	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	231
Occupancy Rate (%):	67
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	144
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	17
Registered Nurses:	195
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

NORTHEASTERN HOSPITAL OF PHILADELPHIA
2301 East Allegheny Avenue, Philadelphia, Pennsylvania 19134-4499, (215) 291-3000

October 13, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Review by physicians of inpatient deaths has for many years been a recognized means of evaluating quality of patient care. Case discussions bring to light areas for possible improvement while simultaneously serving as an educational mechanism for members of the Medical Staff. Mortality review is actively pursued at Northeastern Hospital of Philadelphia and the stimulating discussions at conferences are a prime tool in elevating standards of care and assuring quality of professional performance. However, mortality is only one of a number of outcomes or clinical indicators used in evaluating quality of care, none of which provides a direct measure of quality. Use of the statistical data released by HCFA has limitations imposed by the assumption that each hospital's patients are "average" except with respect to certain characteristics included in the statistical model from which each hospital's range of predicted mortality rates is derived.

The characteristics which the HCFA model recognizes as influencing mortality rates in addition to the principal diagnosis, are the presence of certain complicating illnesses, the patient's age and sex, the number of times the patient was admitted to the hospital in the preceding six months, and whether the patient was transferred from another hospital. Thus, factors which in our view would most affect the outcome of hospital care have been taken into account. Regrettably, the model does not include measures of severity of illness at the time of admission.

Our perception of the typical patient seeking care at Northeastern Hospital is of an elderly individual with a complex history of multiple diseases which interrelate and serve to complicate the diagnosis and treatment of the patient's medical condition. Many of these ailments tend to be chronic in nature so that, although much improvement can take place, the patient is likely to experience future setbacks which will require readmission to the hospital. We find that patients in our geographic area tend to be stoic and often do not seek medical attention until very late in the course of their disease, which makes effective therapy more difficult to achieve.

The stated mission of Northeastern Hospital is "to provide personalized care of the highest quality, consistent with the community's needs and the resources of the hospital." As methods of measuring and evaluating quality are further refined, we look forward to employing them to enhance our efforts in providing high quality patient care services.

Sincerely,

Robert J Moylan

Robert J. Moylan
Chief Executive Officer

RJM:mc

OHIO VALLEY GENERAL HOSPITAL

100 HECKEL ROAD
MCKEES ROCKS, PA 15136

Medicare Hospital Provider Number: 390157

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,366	12	9 - 14	1,396	12	9 - 14
Cancer	31	52	24 - 60	37	51	22 - 56
Cerebrovascular Accidents	46	30	14 - 42	49	22	16 - 40
Gastrointestinal Catastrophes	12	58	12 - 66	17	41	19 - 66
Infectious Disease	14	36	19 - 68	8	0	11 - 54
Metabolic/Electrolyte Disorders	20	35	9 - 53	16	31	12 - 58
Pulmonary Disease	56	20	14 - 37	78	28	18 - 41
Renal Failure	6	67	9 - 79	11	36	13 - 75
Severe Acute Heart Disease	69	32	25 - 49	48	48	27 - 56
Severe Chronic Heart Disease	79	19	15 - 34	101	25	16 - 35
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	139	4	1 - 11	142	2	1 - 8
Gynecologic Disease	18	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	193	1	2 - 6	210	1	1 - 6
Musculoskeletal/Skin Conditions	115	0	1 - 6	104	3	1 - 11
Neuropsychiatric/Sensory Disease	34	3	0 - 44	46	4	0 - 41
Urologic Disease	56	5	0 - 43	43	2	0 - 45

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	118
Occupancy Rate (%):	68
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	100
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	0
Registered Nurses:	120
Licensed Practical Nurses:	40

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

OIL CITY AREA HLTH CNTR INC
174 EAST BISSELL ST
OIL CITY, PA 16301

Medicare Hospital Provider Number: 390171

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	957	12	9 - 14	1,043	12	9 - 15
Cancer	20	55	25 - 68	33	67	31 - 65
Cerebrovascular Accidents	31	23	12 - 42	32	31	15 - 48
Gastrointestinal Catastrophes	14	14	11 - 54	11	55	11 - 66
Infectious Disease	14	21	10 - 56	20	35	17 - 60
Metabolic/Electrolyte Disorders	19	11	10 - 45	15	20	14 - 58
Pulmonary Disease	46	20	12 - 38	51	18	11 - 35
Renal Failure	6	50	7 - 79	5	40	13 - 87
Severe Acute Heart Disease	39	46	25 - 57	46	41	25 - 54
Severe Chronic Heart Disease	37	22	12 - 40	53	21	12 - 35
Severe Trauma	0	-	-	2	50	1 - 92
Gastrointestinal Disease	62	6	1 - 20	101	4	1 - 12
Gynecologic Disease	13	0	0 -100	15	7	0 -100
Low-Risk Heart Disease	116	3	1 - 10	130	0	2 - 6
Musculoskeletal/Skin Conditions	112	3	1 - 10	91	0	1 - 6
Neuropsychiatric/Sensory Disease	24	0	0 - 87	36	6	0 - 35
Urologic Disease	41	2	0 - 40	48	2	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	131
Occupancy Rate (%):	52
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	43
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	131
Licensed Practical Nurses:	30

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Devoted to Caring

Oil City Area
Health Center, Inc.
A member of Horizon Health Group

Writer's Direct Dial Number
814/677 - 1705

October 21, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Gentlemen:

With respect to the report regarding the 1987 mortality statistics recently released by HCFA, please note there is nothing outstanding with respect to the Oil City Area Health Center with the exception of hospital characteristics addressed in the memo from HAP of October 17, 1988.

Enclosed is a review of the 1987 mortality rates released by HCFA for the Oil City Area Health Center.

Sincerely,

Neil E Todhunter

Neil E. Todhunter
President

/dms
Encl.

174 E. Bissell Avenue • P.O. Box 1068 • Oil City, Pennsylvania 16301-0568 • 814/677-1711

REVIEW OF 1987 MORTALITY RATES RELEASED BY HCFA

Following a review of the 1987 mortality rates released by HCFA for the Oil City Area Health Center, death was the expected outcome at the time the patient was admitted or discharged in a large percentage of the cases. For example, the patient was admitted to the health center in a terminal state, and it was the patient or their family who requested that no extraordinary efforts be undertaken, with documentation of same in the medical record.

In none of the diagnostic categories, does the Oil City Area Health Center's actual mortality rate fall outside of the range of the predicted mortality rate.

The data issued by HCFA indicates that a total of 12% of the Medicare patients admitted to the Oil City Area Health Center in 1987 died either while a patient or within 30 days of discharge from the health center.

It was impossible to determine the cause of death of the patients dying after discharge, which the government agency collected through Social Security statistics. The data reveals that 115 of the 957 Medicare patients admitted to the health center died within 30 days after admission. Of these, 85 died while a patient of the health center and 30 died within 30 days of discharge. It should be noted that instead of categorizing the patients who died outside the health center as that listed on the death certificate, they were listed under that of their last discharge from the health center. One example, a patient is admitted because of diabetic ketoacidosis with a secondary terminal metastatic breast cancer. Within 30 days of discharge, the patient died outside the hospital, but the patient was placed in the category of diabetic ketoacidosis and the death is listed under our health center's mortality rates.

Also, the hospital characteristics were taken from the AHA 1986 survey. We did not participate in the survey for that year, but it was reported that we had a total of 103 physicians with 52% being board certified specialists. In 1987, we submitted to the AHA survey a total of 43 physicians with 70% being board certified specialists.

PALMERTON HOSP

135 LAFAYETTE AVE
PALMERTON, PA 18071

Medicare Hospital Provider Number: 390019

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	646	10	10 - 15	736	11	9 - 15
Cancer	17	47	23 - 69	14	57	20 - 69
Cerebrovascular Accidents	29	21	12 - 43	21	48	11 - 53
Gastrointestinal Catastrophes	4	75	12 - 86	4	50	6 - 83
Infectious Disease	5	20	10 - 77	5	40	13 - 83
Metabolic/Electrolyte Disorders	8	50	7 - 70	7	14	12 - 69
Pulmonary Disease	44	18	14 - 39	53	21	17 - 41
Renal Failure	4	50	10 - 88	2	50	4 - 93
Severe Acute Heart Disease	35	26	23 - 53	36	31	25 - 56
Severe Chronic Heart Disease	40	17	12 - 37	42	24	12 - 39
Severe Trauma	2	50	0 - 97	1	0	0 - 98
Gastrointestinal Disease	77	3	1 - 12	61	2	1 - 13
Gynecologic Disease	10	0	0 -100	24	0	0 -100
Low-Risk Heart Disease	84	2	1 - 11	95	1	1 - 8
Musculoskeletal/Skin Conditions	43	5	0 - 31	58	0	1 - 9
Neuropsychiatric/Sensory Disease	11	0	0 - 65	14	0	0 - 99
Urologic Disease	40	2	0 - 33	48	2	0 - 29

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	70
Occupancy Rate (%):	50
Ownership/Control:	Private, Non-profit

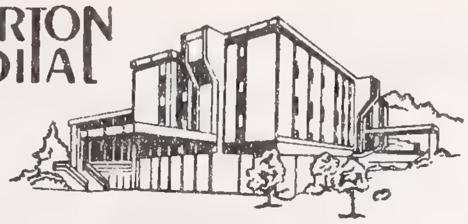
STAFFING

Total Number of Physicians:	43
Percent of Physicians Who Are Board Certified Specialists:	53
Interns and Residents:	0
Registered Nurses:	53
Licensed Practical Nurses:	27

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THE
PALMERTON
HOSPITAL



135 Lafayette Avenue • Palmerton, Pennsylvania 18071
(215) 826-3141

September 30, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Following review of the Medicare statistics prior to the December, 1988 publication by HCFA; we wish to submit the following comment.

When reviewing these categories where the hospital's actual mortality rate percentage is higher than the mean percentage of the predicted mortality for calendar year 1987, one must also consider the fact that the average age of mortality in these categories in our facility was 82.4 years of age which could also be a determining factor in the subsequent mortality.

Sincerely,

THE PALMERTON HOSPITAL

Barbara Spadt

Barbara Spadt,
Administrator

BS:ls

PAOLI MEMORIAL HOSP

LANCASTER AVE
PAOLI, PA 19301

Medicare Hospital Provider Number: 390153

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,462	11	8 - 13	1,465	11	9 - 13
Cancer	36	36	20 - 53	42	40	25 - 56
Cerebrovascular Accidents	60	22	14 - 36	57	39	15 - 42
Gastrointestinal Catastrophes	14	29	12 - 61	13	23	12 - 60
Infectious Disease	16	56	13 - 61	19	11	20 - 55
Metabolic/Electrolyte Disorders	31	26	8 - 44	35	26	15 - 49
Pulmonary Disease	52	29	15 - 41	53	23	15 - 40
Renal Failure	6	67	13 - 83	4	50	12 - 90
Severe Acute Heart Disease	55	38	26 - 53	51	51	27 - 55
Severe Chronic Heart Disease	61	26	13 - 36	32	22	13 - 43
Severe Trauma	2	0	1 - 91	3	100	8 - 81
Gastrointestinal Disease	101	3	1 - 11	91	3	0 - 13
Gynecologic Disease	10	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	159	3	1 - 8	165	4	1 - 9
Musculoskeletal/Skin Conditions	191	2	1 - 6	186	2	0 - 8
Neuropsychiatric/Sensory Disease	52	6	0 - 38	81	4	0 - 20
Urologic Disease	71	3	0 - 40	59	2	0 - 29

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	188
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	138
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	0
Registered Nurses:	188
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PENNSYLVANIA HOSP

8TH SPRUCE STS
PHILADELPHIA, PA 19107

Medicare Hospital Provider Number: 390226

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,826	7	9 - 13	2,909	7	9 - 13
Cancer	175	27	31 - 50	191	38	35 - 55
Cerebrovascular Accidents	61	20	16 - 37	61	28	18 - 42
Gastrointestinal Catastrophes	20	40	15 - 59	15	13	11 - 52
Infectious Disease	21	29	21 - 61	32	41	20 - 57
Metabolic/Electrolyte Disorders	24	17	16 - 51	33	24	15 - 49
Pulmonary Disease	76	29	19 - 41	69	33	20 - 45
Renal Failure	16	44	12 - 70	11	55	15 - 78
Severe Acute Heart Disease	59	25	28 - 53	59	31	27 - 52
Severe Chronic Heart Disease	113	9	16 - 29	95	14	16 - 32
Severe Trauma	4	25	3 - 80	6	33	8 - 76
Gastrointestinal Disease	119	1	1 - 7	131	1	1 - 7
Gynecologic Disease	42	0	0 - 97	49	0	0 - 87
Low-Risk Heart Disease	278	3	2 - 7	231	1	2 - 6
Musculoskeletal/Skin Conditions	588	1	1 - 4	582	0	1 - 4
Neuropsychiatric/Sensory Disease	56	0	3 - 11	91	0	1 - 7
Urologic Disease	191	1	0 - 6	225	0	0 - 5

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	460
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	312
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	100
Registered Nurses:	398
Licensed Practical Nurses:	108

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

PHILIPSBURG STATE GENERAL HOSPITAL

LOCH LOMOND ROAD
PHILIPSBURG, PA 16866

Medicare Hospital Provider Number: 390187

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	796	13	10 - 16	841	12	10 - 16
Cancer	12	58	29 - 81	14	50	25 - 74
Cerebrovascular Accidents	26	31	13 - 49	24	29	12 - 49
Gastrointestinal Catastrophes	7	57	11 - 75	9	33	7 - 66
Infectious Disease	20	40	22 - 65	15	40	17 - 65
Metabolic/Electrolyte Disorders	18	17	10 - 50	18	28	6 - 51
Pulmonary Disease	45	22	19 - 45	46	20	16 - 41
Renal Failure	2	100	9 - 94	3	67	10 - 92
Severe Acute Heart Disease	56	34	23 - 49	56	32	25 - 51
Severe Chronic Heart Disease	35	29	12 - 43	49	24	13 - 38
Severe Trauma	0	-	-	1	100	1 - 97
Gastrointestinal Disease	75	3	0 - 14	68	3	1 - 15
Gynecologic Disease	8	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	115	10	1 - 15	106	6	1 - 13
Musculoskeletal/Skin Conditions	74	3	0 - 14	87	1	1 - 9
Neuropsychiatric/Sensory Disease	26	0	0 - 50	22	9	0 - 68
Urologic Disease	48	0	0 - 23	37	0	1 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	130
Occupancy Rate (%):	39
Ownership/Control:	State Government

STAFFING

Total Number of Physicians:	33
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	0
Registered Nurses:	94
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PHOENIXVILLE HOSP

144 NUTT ROAD
PHOENIXVILLE, PA 19460

Medicare Hospital Provider Number: 390127

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,512	11	10 - 15	1,608	10	10 - 14
Cancer	42	57	31 - 63	50	58	30 - 60
Cerebrovascular Accidents	61	26	17 - 41	59	20	19 - 41
Gastrointestinal Catastrophes	18	22	16 - 57	13	38	17 - 69
Infectious Disease	18	22	16 - 57	15	13	18 - 58
Metabolic/Electrolyte Disorders	23	48	14 - 56	25	12	11 - 44
Pulmonary Disease	85	21	17 - 37	79	15	17 - 37
Renal Failure	3	67	8 - 90	3	100	6 - 82
Severe Acute Heart Disease	55	51	25 - 52	57	35	27 - 54
Severe Chronic Heart Disease	86	22	17 - 36	86	34	17 - 38
Severe Trauma	2	0	2 - 89	0	-	-
Gastrointestinal Disease	115	3	1 - 9	121	1	1 - 7
Gynecologic Disease	13	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	188	3	2 - 7	198	2	2 - 7
Musculoskeletal/Skin Conditions	137	2	1 - 8	164	2	1 - 8
Neuropsychiatric/Sensory Disease	36	3	0 - 55	40	5	0 - 41
Urologic Disease	70	0	0 - 9	63	0	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	175
Occupancy Rate (%):	63
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	111
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	183
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Thomas J. Donnelly, *President*

Phoenixville Hospital

140 Nutt Road
Phoenixville, Pennsylvania 19460
(215) 933-9281

October 21, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

Attention: Sandra Kappert

Dear Ms. Kappert:

In response to your release of September 15 regarding the HCFA mortality data, we have attached a sheet to this letter which is correcting the hospital characteristics of the 1987 AHA survey.

Phoenixville Hospital is pleased to be able to comment on the 1987 HCFA mortality data which shows a mortality rate well within the national predicted ranges for all diseases analyzed.

We would like to bring to your attention that there are several inherent deficiencies with the data which do not take into consideration the patients' condition on admission or their severity of illness. We agree with HCFA Administrator, William Roper, M.D. who says that "you cannot make judgments about the quality of care in an individual hospital" by using this data.

However, the Quality Assurance Committee at Phoenixville Hospital reviewed the 1987 data for specific diagnoses in the six most significant causes of death nationally. We reviewed this data as to the overall quality of care and treatment to these patients. As an extra check, we cross-referenced all charts as to whether they were classified correctly by HCFA and made the extra attempt to grade severity of illness on admission to the hospital, a screening characteristic that HCFA has not included in their parameters.

For each disease category, a board certified sub-specialist reviewed each patient hospital record independently and objectively. The sub-specialist results were then submitted for further review by the Quality Assurance Committee where they were checked for accuracy, completeness, and reliability. There are many cases which were improperly classified by HCFA.

Our analysis regarding severity of illness indicates that in 95% of these patients the outcome was predicted on admission to the hospital. In all cases reviewed, the quality of care and treatment given to the patients within the Phoenixville Hospital was found to be excellent, in compliance in all instances with individual medical and surgical department standards, and without breach of any quality control measures that have been established.

We take great pride at the Phoenixville Hospital in the quality of care given to every patient. Even though we feel the HCFA data has imperfections, we have addressed, with 100% chart review, all of the data with quality assurance and patient care as the only objective.

Sincerely,

Thomas J Donnelly

Thomas J. Donnelly
President

Michael H Bleshman M.D.

Michael H. Bleshman, M.D.
President, Medical Staff

TJD/ef
Enclosure - Correction to 1987 AHA Survey

POCONO MEDICAL CNTR

206 E BROWN ST
EAST STROUDSBURG, PA 18301

Medicare Hospital Provider Number: 390201

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,995	10	11 - 15	2,130	11	11 - 15
Cancer	60	43	27 - 55	62	52	30 - 58
Cerebrovascular Accidents	118	18	20 - 36	116	16	20 - 35
Gastrointestinal Catastrophes	19	32	19 - 63	24	25	18 - 56
Infectious Disease	24	21	19 - 54	22	41	19 - 61
Metabolic/Electrolyte Disorders	26	27	11 - 49	31	29	16 - 52
Pulmonary Disease	120	16	19 - 36	121	21	17 - 35
Renal Failure	3	100	16 - 91	4	25	14 - 90
Severe Acute Heart Disease	106	40	30 - 51	101	33	28 - 48
Severe Chronic Heart Disease	103	15	15 - 30	126	20	17 - 33
Severe Trauma	4	25	3 - 81	2	50	1 - 93
Gastrointestinal Disease	108	3	1 - 10	128	1	2 - 7
Gynecologic Disease	23	0	0 -100	22	0	0 -100
Low-Risk Heart Disease	223	3	2 - 8	243	3	2 - 7
Musculoskeletal/Skin Conditions	183	1	1 - 6	155	1	1 - 7
Neuropsychiatric/Sensory Disease	49	2	1 - 16	69	3	1 - 14
Urologic Disease	112	2	0 - 12	91	4	0 - 36

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 197
Occupancy Rate (%): 72
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 88
Percent of Physicians Who Are Board Certified Specialists: 70
Interns and Residents: 0
Registered Nurses: 249
Licensed Practical Nurses: 37

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

POCONO
MEDICAL
CENTER

September 30, 1988

William L. Roper, M.D.,
Administrator
Department of Health and Human Services
Health Care Financing Administration
Washington, D.C. 20201

RE: 1987 HCFA Mortality Statistics
Pocono Medical Center, East Stroudsburg, PA
Medicare Provider No. 390201

Dear Dr. Roper:

We are responding to the 1987 Mortality Statistics compiled by the Healthcare Financing Administration that were recently forwarded to Pocono Medical Center for review. We have evaluated the statistics to the best of our ability and have been unable to find any inaccuracies. We, however did not review the patients who died after leaving the hospital.

In reviewing our mortality rates in the seventeen categories, we found that our actual mortality rates fell within or below the range of predicted mortality in all but one category. Also, in all except the one category we were either below the predicted range or in the lower half of the predicted range of mortality.

There were three deaths in the category of renal failure, and this was a 100% mortality rate. The predicted range for that category for our hospital was 16 to 91 percent.

These three charts were reviewed: The first patient - [redacted] was an [redacted]. The other two patients - [redacted]

We at Pocono Medical Center feel that the above explanations combined with the small number of patients in this category would account for the 100% figure.

206 East Brown Street
East Stroudsburg, PA 18301
(717) 421-4000
Telefax: (717) 476-3469

Thank you for your consideration of our explanation of these statistics.

Sincerely,

Sherwood Samet, M.D.
Medical Director

SS/dds

cc: Mr. J. Ferguson
Mr. C. Garris

PODIATRY HOSP OF PITTSBURGH

215 S NEGLEY AVE
PITTSBURGH, PA 15206

Medicare Hospital Provider Number: 390238

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	132	0	0 - 11	140	0	0 - 11
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	0	-	-
Musculoskeletal/Skin Conditions	118	0	0 - 12	129	0	0 - 9
Neuropsychiatric/Sensory Disease	5	0	0 -100	4	0	0 -100
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	17
Occupancy Rate (%):	19
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	95
Percent of Physicians Who Are Board Certified Specialists:	44
Interns and Residents:	0
Registered Nurses:	21
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

POLYCLINIC MEDICAL CENTER

3RD ST POLYCLINIC AVE
HARRISBURG, PA 17105

Medicare Hospital Provider Number: 390067

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,415	11	9 - 13	2,617	11	10 - 14
Cancer	81	43	29 - 54	123	33	29 - 51
Cerebrovascular Accidents	110	20	17 - 34	106	24	16 - 34
Gastrointestinal Catastrophes	12	42	10 - 64	25	60	17 - 58
Infectious Disease	25	36	17 - 56	33	33	22 - 57
Metabolic/Electrolyte Disorders	41	15	10 - 38	43	35	9 - 42
Pulmonary Disease	82	20	14 - 34	101	24	16 - 36
Renal Failure	13	31	8 - 67	13	31	13 - 72
Severe Acute Heart Disease	105	42	26 - 47	109	32	26 - 46
Severe Chronic Heart Disease	137	21	15 - 31	150	18	16 - 31
Severe Trauma	4	50	3 - 82	7	14	5 - 65
Gastrointestinal Disease	160	3	1 - 9	212	3	1 - 7
Gynecologic Disease	20	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	426	4	2 - 6	363	4	1 - 6
Musculoskeletal/Skin Conditions	242	1	1 - 5	255	2	1 - 6
Neuropsychiatric/Sensory Disease	44	0	0 - 15	68	1	1 - 12
Urologic Disease	53	2	0 - 42	41	0	0 - 28

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	493
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	247
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	13
Registered Nurses:	346
Licensed Practical Nurses:	79

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

POTTSTOWN MEM MED CTR
HIGH ST AND FIRESTONE RD
POTTSTOWN, PA 19464

Medicare Hospital Provider Number: 390123

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,995	13	10 - 14	2,186	14	9 - 14
Cancer	79	52	31 - 56	94	57	34 - 58
Cerebrovascular Accidents	81	38	17 - 40	89	34	18 - 39
Gastrointestinal Catastrophes	17	29	16 - 61	13	31	20 - 69
Infectious Disease	19	37	17 - 61	17	29	14 - 58
Metabolic/Electrolyte Disorders	30	7	13 - 40	40	17	12 - 41
Pulmonary Disease	76	22	17 - 38	80	26	14 - 36
Renal Failure	7	43	7 - 76	8	38	9 - 76
Severe Acute Heart Disease	77	39	26 - 49	69	43	26 - 51
Severe Chronic Heart Disease	110	26	16 - 34	109	38	16 - 36
Severe Trauma	2	0	1 - 91	3	33	1 - 89
Gastrointestinal Disease	136	2	1 - 8	144	6	1 - 12
Gynecologic Disease	18	0	0 -100	19	0	0 -100
Low-Risk Heart Disease	226	6	2 - 9	265	3	2 - 7
Musculoskeletal/Skin Conditions	267	2	1 - 6	341	3	1 - 6
Neuropsychiatric/Sensory Disease	92	3	0 - 14	90	3	0 - 21
Urologic Disease	78	1	0 - 12	80	5	0 - 34

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	239
Occupancy Rate (%):	68
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	109
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	172
Licensed Practical Nurses:	56

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

POTTSVILLE HOSP WARNE CLINIC

420 S JACKSON ST
POTTSVILLE, PA 17901

Medicare Hospital Provider Number: 390030

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,575	11	9 - 14	1,732	14	10 - 14
Cancer	38	45	23 - 57	47	47	23 - 54
Cerebrovascular Accidents	63	24	16 - 38	70	33	16 - 40
Gastrointestinal Catastrophes	9	11	6 - 57	8	63	15 - 76
Infectious Disease	14	36	11 - 60	9	44	11 - 70
Metabolic/Electrolyte Disorders	26	27	15 - 52	32	34	10 - 46
Pulmonary Disease	74	16	16 - 36	80	25	14 - 36
Renal Failure	4	25	4 - 82	4	0	13 - 81
Severe Acute Heart Disease	82	28	27 - 48	114	27	27 - 46
Severe Chronic Heart Disease	139	18	14 - 28	145	31	14 - 31
Severe Trauma	0	-	-	1	0	2 - 97
Gastrointestinal Disease	123	2	1 - 8	120	2	1 - 10
Gynecologic Disease	13	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	213	2	1 - 7	266	6	1 - 8
Musculoskeletal/Skin Conditions	123	4	1 - 11	155	2	1 - 7
Neuropsychiatric/Sensory Disease	89	0	1 - 7	49	6	0 - 56
Urologic Disease	43	2	0 - 44	49	8	0 - 46

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	205
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	71
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	163
Licensed Practical Nurses:	40

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PRESB-UNIV OF PA MED CTR

51 N 39TH ST
PHILADELPHIA, PA 19104

Medicare Hospital Provider Number: 390223

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,622	10	10 - 14	2,572	10	10 - 14
Cancer	63	38	33 - 60	79	47	35 - 60
Cerebrovascular Accidents	89	21	19 - 37	56	25	15 - 39
Gastrointestinal Catastrophes	14	29	11 - 60	22	18	20 - 57
Infectious Disease	31	71	30 - 64	33	45	24 - 60
Metabolic/Electrolyte Disorders	33	18	11 - 43	44	16	14 - 42
Pulmonary Disease	90	22	18 - 38	75	28	18 - 41
Renal Failure	15	33	13 - 70	5	40	7 - 82
Severe Acute Heart Disease	83	24	31 - 51	75	29	29 - 51
Severe Chronic Heart Disease	163	15	17 - 30	148	11	17 - 30
Severe Trauma	3	67	2 - 86	7	29	6 - 70
Gastrointestinal Disease	120	3	2 - 10	90	2	2 - 10
Gynecologic Disease	9	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	549	4	3 - 7	547	7	2 - 7
Musculoskeletal/Skin Conditions	129	2	1 - 8	110	0	1 - 6
Neuropsychiatric/Sensory Disease	242	1	1 - 6	260	1	1 - 5
Urologic Disease	42	0	0 - 19	59	3	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	308
Occupancy Rate (%):	81
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	331
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	98
Registered Nurses:	396
Licensed Practical Nurses:	71

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

PRESBYTERIAN-UNIVERSITY OF PENNSYLVANIA MEDICAL CENTER
39th and Market Streets, Philadelphia, Pennsylvania 19104 • 215 662-9103

I. Donald Snook, Jr., President

October 20, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, MD 21207

Attn: Sandra Kappert

Dear Ms. Kappert:

Presbyterian applauds your policy of promoting consumer awareness through the sharing of health care information.

We have evaluated the Medicare mortality data you provided. Our overall mortality rate is at the low range of your prediction. In one area — infectious disease — we show a slightly higher range.

We did a thorough review of the records of every patient included in this category and found that:

° All of the patients were admitted to the hospital in critical condition, suffering from overwhelming sepsis (severe infection involving the entire body.)

°The average age of the patients was 78; more than half were over the age of 80.

° There were no unusual patterns, trends or similarities. In each case, treatment was thoroughly evaluated and found to be well within medical standards of practice. There were no quality issues involved in the care.

° The difference between the actual and predicted mortality rate is slight, and from our study can be explained by the advanced age and the serious, generally poor condition of the patients.

All of us in health care know that medicine is not an exact science; it is impossible to predict with 100 percent accuracy how a patient will respond to treatment. Too many uncontrollable variables are involved.

Sandra Kappert
Page Two
October 20, 1988

But information like this is still valuable. For Presbyterian, it is one more opportunity for us to evaluate the quality and appropriateness of the care our patients receive. Considering the critical importance of the service we provide, these intensive reviews have long been an essential daily activity. We welcome any opportunity to continue our efforts.

Sincerely,

J. Donald Snook, Jr.
President

PRESBYTERIAN-UNIVERSITY HOSP

DE SOTO AT O HARA STS
PITTSBURGH, PA 15213

Medicare Hospital Provider Number: 390164

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,629	10	10 - 14	3,635	9	9 - 13
Cancer	226	29	31 - 50	209	32	34 - 53
Cerebrovascular Accidents	108	30	16 - 35	104	36	17 - 37
Gastrointestinal Catastrophes	49	33	20 - 52	37	19	16 - 47
Infectious Disease	38	32	23 - 56	38	53	22 - 56
Metabolic/Electrolyte Disorders	47	19	12 - 41	31	16	7 - 39
Pulmonary Disease	91	27	20 - 41	102	25	20 - 40
Renal Failure	70	11	4 - 51	95	11	2 - 53
Severe Acute Heart Disease	97	41	24 - 46	100	27	26 - 45
Severe Chronic Heart Disease	150	17	17 - 31	132	20	18 - 34
Severe Trauma	8	75	9 - 68	9	22	9 - 65
Gastrointestinal Disease	186	2	1 - 7	186	2	1 - 7
Gynecologic Disease	3	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	333	3	2 - 6	322	6	2 - 8
Musculoskeletal/Skin Conditions	438	1	1 - 5	519	2	1 - 4
Neuropsychiatric/Sensory Disease	219	3	1 - 8	187	1	1 - 5
Urologic Disease	91	2	0 - 15	99	0	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	568
Occupancy Rate (%):	84
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	527
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	279
Registered Nurses:	712
Licensed Practical Nurses:	44

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

Presbyterian-University Hospital of Pittsburgh

(412) 647-3014

October 19, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Re: Hospital ID: 390164

Dear Mrs. Kappert:

Enclosed are the comments concerning the mortality rates for Presbyterian-University Hospital in Pittsburgh. Please note also that the Hospital Characteristics are inaccurate and should be as follows:

SURVEY & YEAR: AHA 1987

BEDS (#): 568
OCCUPANCY RATE (%): 84
OWNERSHIP/CONTROL: Private, Non-Profit

STAFFING:

TOTAL NUMBER OF PHYSICIANS: 575
PERCENT OF PHYSICIANS WHO ARE BOARD CERTIFIED SPECIALISTS: 86
INTERNS AND RESIDENTS PER BED: 0.44
REGISTERED NURSES PER BED: 1.13
LICENSED PRACTICAL NURSES PER BED: 0.06

SPECIALTY SERVICES:

SHOCK/TRAUMA OR BURN UNIT: YES
CORONARY CARE UNIT: YES
ORGAN TRANSPLANT SERVICE: YES
HOSPICE CARE: NO

Sincerely,

Patricia Shehorn

Patricia Shehorn
Administrator

PS:CC:day

MEDICARE PROVIDER NUMBER: 390164

The following are the brief comments of Presbyterian-University Hospital ("Presbyterian") of Pittsburgh, Pennsylvania concerning the mortality rates prepared by HCFA. As a 636-bed tertiary acute care academic medical center, Presbyterian serves as a national and regional referral center and as the primary teaching facility for the University of Pittsburgh School of Medicine. Presbyterian, while reassured by its own low mortality rates, believes that these numbers do not represent the sole or most important measure of the quality of care provided by its medical and hospital staff. Because of the sophisticated services that are provided in the academic medical center, and the corresponding referral of gravely ill patients, studying mortality rates by looking only at numbers is misleading. Therefore, reviewing mortality statistics is but one small portion of the hospital's ongoing mission to constantly measure the quality of care provided and seek to enhance it.

CASE REVIEW AND QUALITY OF CARE

As emphasized by HCFA, mortality rates cannot and should not be used to judge the quality of care given at a hospital. The reasons for this are exemplified by studying the cases in the Severe Trauma category. Presbyterian reviewed the quality assurance records from its monthly Mortality Conferences and the medical records for the six deaths in this category. The findings from this review illustrate exactly how HCFA mortality numbers can be extremely misleading. In each of these six cases, death was the expected outcome, based on the patient's admission trauma score and injury severity in accordance with nationally recognized statistical methodologies. Five of the deaths involved severe head injuries which carry with them a high mortality rate, especially in light of the fact that three of the patients were over 80 years of age. The remaining case involved a patient with multiple systems failure who had a very low chance of survival due not only to the intracranial bleeding for which the patient was admitted but also due to preexisting diabetes mellitus, congestive heart failure, and hypertension. Also, in three of the cases, due to the patient's severe brain injuries and extremely grave prognosis, the patient's family in consultation with the attending physician chose not to authorize more treatment to artificially prolong life. Thus, a study of these cases identified by HCFA has limited usefulness in attempting to measure quality or find additional ways to enhance the provision of trauma care.

DATA VERIFICATION

In the Severe Trauma category, 9 Medicare cases were included for the 1986 calendar year and 8 cases for the 1987 calendar year. As HCFA noted, the fewer the number of cases in a category, the greater the uncertainty in attempting to predict mortality. For 1986, the HCFA methodology estimated that between one and 6 severe trauma patients would die, whereas 2 actual deaths occurred. In

1987, the methodology predicted that one to 5 patients could be expected to die, compared with six actual deaths. When verifying these numbers from a review of the Medicare patient medical records, Presbyterian determined that there were actually 12 cases in 1987 that should be considered in this category. Based on these numbers, the actual mortality rate at Presbyterian was 50% which would have fallen within HCFA's predicted range.

The small sample for trauma cases can be directly traced to the formula used by HCFA (the number of patients who died within 30 days of admission to a hospital is divided by the total number of Medicare patients whose last admission in the calendar year was to that hospital). This may often lead to a range of mortality rates so broad that it is not meaningful. The potential for a small sample is especially great in the Severe Trauma category for several reasons. Because of the nature of its causes, trauma is primarily a young person's disease, affecting only small numbers of elderly individuals. As a Regional Resource Trauma Center, Presbyterian's Trauma Team treats more than 600 seriously injured patients of all ages each year with a significantly lower mortality rate, yet HCFA's mortality calculations for Presbyterian were based on eight cases. The number of patients in this category is further reduced by the fact that Medicare is not usually the primary payor for trauma patients brought in as a result of automobile accidents or other accidents that result in commercial payor coverage.

Another reason for the small sample in the Severe Trauma category is that trauma patients do not usually choose a particular hospital, but instead are sent to hospitals with special trauma capabilities such as Presbyterian. Once the condition that resulted from the trauma is treated and a patient is discharged from the hospital, there is often no reason for the patient to return to that hospital, even if at some point the patient requires treatment for a related or non-related condition. Thus, it can be expected that trauma patients may very well have subsequent admissions to other hospitals, that excludes them from the HCFA numbers of the hospital which treated them for trauma. Although the impact of the weakness in the HCFA methodology is difficult to pin down numerically, the small number of cases demonstrates that the HCFA analysis does not provide a representative picture of the trauma services provided by Presbyterian.

CONCLUSION

Presbyterian continues to welcome efforts to provide meaningful quality data and urges further refinement of the HCFA data. The changes in Presbyterian's numbers from 1986 are encouraging. HCFA's refinements to the system verified some of the flaws previously pointed out by Presbyterian. However, as illustrated by the above discussion, more improvement is needed before the data can be considered to be meaningful or helpful. The inclusion of Severe Trauma patients in a hospital's mortality statistics is particularly inappropriate for the reasons detailed above.

PUNXSUTAWNEY AREA HOSP INC

RD 5, ROUTE 36 NORTH
PUNXSUTAWNEY, PA 15767

Medicare Hospital Provider Number: 390199

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	476	16	12 - 19	514	17	13 - 20
Cancer	7	71	22 - 84	8	25	21 - 79
Cerebrovascular Accidents	16	31	8 - 54	23	35	14 - 53
Gastrointestinal Catastrophes	6	33	14 - 80	3	33	7 - 88
Infectious Disease	10	20	9 - 61	9	56	17 - 75
Metabolic/Electrolyte Disorders	8	13	4 - 60	8	50	11 - 73
Pulmonary Disease	65	25	17 - 40	63	29	15 - 40
Renal Failure	2	50	6 - 99	1	100	3 - 98
Severe Acute Heart Disease	37	46	26 - 59	37	54	31 - 64
Severe Chronic Heart Disease	23	17	10 - 43	34	21	15 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	31	13	0 - 74	51	0	1 - 11
Gynecologic Disease	6	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	51	0	1 - 11	41	2	2 - 17
Musculoskeletal/Skin Conditions	41	7	0 - 59	37	0	3 - 14
Neuropsychiatric/Sensory Disease	6	17	0 -100	8	0	0 - 88
Urologic Disease	19	5	0 - 86	24	0	0 - 46

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	75
Occupancy Rate (%):	36
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	21
Percent of Physicians Who Are Board Certified Specialists:	38
Interns and Residents:	0
Registered Nurses:	56
Licensed Practical Nurses:	25

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PAH PUNXSUTAWNEY
AREA
HOSPITAL
R.D. #5, Route 36 North • Punxsutawney, Pa. 15767 • (814) 938-4500

HCFA Mortality Release Comments
Punxsutawney Area Hospital, Medicare Provider #390199

The data source utilized by HCFA indicates that a total of 78 Medicare patients admitted to Punxsutawney Area Hospital in calendar year 1986 expired within 30 days of admission. Of these, HCFA indicates 56 died while inpatients at this facility, and 22 died within thirty days of discharge or transfer to a sub-acute level of care. In a relative sense, our analysis of the medical records of deceased Medicare beneficiaries supports the accuracy of the reported data. There are minor variations in the number of deaths, type of death and hospitalization status which we clarified to HCFA. Our data, garnered via case by case medical record review, details 76 Medicare beneficiary deaths with 56 occurring in the hospital and 20 occurring within thirty days of patient discharge.

In none of the diagnostic categories does the hospital's actual mortality rate fall outside of the range of predicted mortality rates generated by HCFA's statistical model. However, there are several explanatory factors that may account for the hospital's mortality indicators in several diagnostic categories which appear to approach the upper quartiles of the expected rates.

Age

Punxsutawney Area Hospital serves a disproportionate share of elderly residents when comparisons are noted with state and national indicators. Of the 78 HCFA reported mortalities, the mean age at the time of death was 79.9 years, considerably higher than the male and female lifespan. The inevitable infirmities of age and the subsequent higher incidence of serious co-morbid and complicating conditions limit provider treatment strategies and successful intervention.

Sample Size

In analyzing the data, it is important to recognize that the Punxsutawney Area Hospital is a rural primary care oriented facility drawing small numbers of patients in given diagnostic categories. Accordingly, the smaller number of admissions, the less reliable are statistics due to random variations of outcomes in individual cases. Interpretations should therefore be rendered with caution.

Patient/Family Wishes

The limited availability of skilled nursing beds, as well as the lack of appropriate hospital or respite care programs throughout the hospital service area, requires the hospital to continue to serve a role for terminally ill patients with chronic degenerative conditions. In 90% of the reported mortalities death was an expected outcome at the time of the patient's admission.

Further, our analysis reveals that in 58 cases or 75%, family/patient requests consistent with Do Not Resuscitate policies precluded maximal therapeutic intervention that may have prolonged life longevity without regard to the quality of that life extension.

Lifestyle

The data generated via the HCFA statistical model does not take into account variations in lifestyle between communities. Over 40% of the adult population throughout the primary service area complete less than twelve years of formal education. Other relevant socioeconomic indicators also signifcantly deviate from average. The economy of the area is primarily agrarian and supported by the coal mining industry. These factors combined affect the levels of appropriate healthful lifestyles in the community, personal health awareness, patient compliance with treatment regimens and consumer willingness and ability to access health care providers. Ultimately, these factors compromise the timeliness and effectiveness of our intervention as health care providers.

For the above reasons we believe that the HCFA data should not be interpreted as definitive measures of hospital performance and should not be utilized as the basis for judging the quality of care provided by Punxsutawney Area Hospital. Rather, this data should be utilized to better focus hospital and federally initiated quality assurance programs.

QUAKERTOWN HOSP ASSN

11TH STPARK AVE
QUAKERTOWN, PA 18951

Medicare Hospital Provider Number: 390035

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	816	11	9 - 14	839	14	10 - 16
Cancer	20	35	21 - 63	19	37	20 - 63
Cerebrovascular Accidents	48	31	15 - 42	29	31	14 - 48
Gastrointestinal Catastrophes	4	0	8 - 72	7	43	7 - 72
Infectious Disease	7	29	8 - 70	7	43	7 - 72
Metabolic/Electrolyte Disorders	7	29	6 - 70	8	25	3 - 66
Pulmonary Disease	38	24	12 - 41	54	30	11 - 38
Renal Failure	8	50	16 - 83	7	29	14 - 82
Severe Acute Heart Disease	28	36	22 - 58	44	52	25 - 55
Severe Chronic Heart Disease	43	30	13 - 41	49	29	15 - 41
Severe Trauma	0	-	-	1	0	0 - 99
Gastrointestinal Disease	69	4	1 - 17	73	7	1 - 19
Gynecologic Disease	10	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	138	2	1 - 8	115	3	1 - 10
Musculoskeletal/Skin Conditions	88	0	1 - 7	76	5	0 - 19
Neuropsychiatric/Sensory Disease	13	0	0 - 86	24	0	0 - 47
Urologic Disease	26	0	0 - 35	25	0	0 - 48

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 89
Occupancy Rate (%): 71
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 134
Percent of Physicians Who Are Board Certified Specialists: 65
Interns and Residents: 0
Registered Nurses: 75
Licensed Practical Nurses: 18

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

READING HOSPITAL MED CTR

6TH AVE AND SPRUCE ST
READING, PA 19603

Medicare Hospital Provider Number: 390044

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	5,819	11	9 - 13	6,114	10	9 - 13
Cancer	255	46	28 - 47	254	40	30 - 48
Cerebrovascular Accidents	241	27	20 - 34	244	25	19 - 32
Gastrointestinal Catastrophes	41	32	18 - 52	46	33	24 - 56
Infectious Disease	98	20	23 - 45	98	23	25 - 48
Metabolic/Electrolyte Disorders	36	17	11 - 42	44	23	15 - 45
Pulmonary Disease	174	24	16 - 32	160	27	17 - 35
Renal Failure	25	32	14 - 65	19	42	13 - 69
Severe Acute Heart Disease	331	33	30 - 45	309	30	31 - 45
Severe Chronic Heart Disease	242	21	16 - 28	315	18	17 - 28
Severe Trauma	14	21	9 - 57	13	46	10 - 64
Gastrointestinal Disease	370	1	2 - 5	434	3	1 - 6
Gynecologic Disease	61	2	0 -100	62	0	0 - 98
Low-Risk Heart Disease	870	3	2 - 5	847	3	2 - 5
Musculoskeletal/Skin Conditions	715	1	1 - 4	731	2	1 - 4
Neuropsychiatric/Sensory Disease	336	2	1 - 6	411	1	1 - 5
Urologic Disease	203	2	0 - 7	238	3	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	575
Occupancy Rate (%):	78
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	300
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	56
Registered Nurses:	544
Licensed Practical Nurses:	174

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

RIDDLE MEM HOSP

US RT 1
MEDIA, PA 19063

Medicare Hospital Provider Number: 390222

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,466	14	11 - 15	2,183	12	11 - 15
Cancer	57	49	31 - 60	47	45	25 - 56
Cerebrovascular Accidents	113	31	19 - 38	109	24	18 - 36
Gastrointestinal Catastrophes	14	36	14 - 63	10	20	12 - 64
Infectious Disease	48	31	21 - 51	66	36	22 - 50
Metabolic/Electrolyte Disorders	58	28	13 - 42	71	23	10 - 37
Pulmonary Disease	180	30	19 - 36	137	31	19 - 38
Renal Failure	15	67	17 - 73	8	63	16 - 82
Severe Acute Heart Disease	84	38	30 - 53	92	32	29 - 50
Severe Chronic Heart Disease	109	30	15 - 34	118	33	17 - 35
Severe Trauma	9	0	11 - 52	1	0	1 - 97
Gastrointestinal Disease	153	2	1 - 8	151	1	2 - 7
Gynecologic Disease	16	0	0 -100	18	0	0 - 86
Low-Risk Heart Disease	262	3	2 - 7	206	3	2 - 8
Musculoskeletal/Skin Conditions	295	4	1 - 7	248	2	1 - 6
Neuropsychiatric/Sensory Disease	50	2	0 - 19	47	0	1 - 12
Urologic Disease	122	1	1 - 7	122	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	233
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	206
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	141
Licensed Practical Nurses:	96

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Riddle Memorial Hospital

Provider #390222

The data presents mortality information about Medicare patients treated at Riddle Memorial Hospital during 1986 and 1987. The statistics show the number of Medicare patients admitted, the actual percent of these patients who expired within 30 days of their last admission and the Hospital's specific predicted range of the percent of patients who would have been expected to expire given adjustments for specific patient characteristics. Since the predicted ranges are specific for Riddle Memorial Hospital, the comparison of statistics among or between hospitals is meaningless.

Riddle Memorial Hospital has conducted a thorough review of our mortality data. It is significant to note that Riddle Memorial Hospital treats an unusually high proportion of Medicare nursing home patients within our service area. For example, during calendar year 1987, more than one half (51.1%) of the Medicare patients who expired within 30 days of admission to RMH were admitted from a nursing home. In addition, the average age of these nursing home admissions was 83.3. For comparative purposes, the Delaware Valley Regional Database revealed that during FY, 1987, Delaware Valley suburban community hospitals were transferring approximately 13.7% of their Medicare patients to a nursing home. In comparison, Riddle Memorial Hospital transferred approximately 23.8% of its Medicare patients to a nursing home, thereby representing a 73.7% increase relative to Delaware Valley suburban community hospitals. Moreover, approximately 85.0% of Riddle's transfers to a nursing home were originally admitted from a nursing home.

Finally, it is important to note that the predicted mortality ranges do not account for the patient's severity of their illness at the time of admission or, in other words, the stage of the patient's particular illness at the time of admission. Obviously, this factor can be a vital predictor in calculating expected mortality rates. This severity indicator can have a significant impact on an institution's actual mortality rates, if, in fact, a particular institution is treating patients who are in a more advanced stage of their illness at the time of admission. Incorporating a measurement of patient severity will undoubtedly improve the validity of the data.

(215) 566-9400

ROBERT PACKER HOSP

GUTHRIE SQUARE
SAYRE, PA 18840

Medicare Hospital Provider Number: 390079

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,004	8	9 - 13	3,052	8	9 - 13
Cancer	140	34	30 - 51	127	37	33 - 54
Cerebrovascular Accidents	49	24	15 - 40	86	22	18 - 38
Gastrointestinal Catastrophes	25	16	21 - 55	21	10	19 - 52
Infectious Disease	30	50	18 - 56	17	35	17 - 62
Metabolic/Electrolyte Disorders	32	3	12 - 37	21	19	9 - 48
Pulmonary Disease	77	22	17 - 39	97	23	17 - 37
Renal Failure	21	19	13 - 64	14	14	9 - 64
Severe Acute Heart Disease	95	41	26 - 48	81	30	28 - 49
Severe Chronic Heart Disease	89	22	15 - 34	104	15	15 - 31
Severe Trauma	3	0	7 - 80	4	25	6 - 81
Gastrointestinal Disease	144	3	3 - 9	163	1	2 - 7
Gynecologic Disease	19	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	563	3	2 - 6	568	4	2 - 6
Musculoskeletal/Skin Conditions	355	0	1 - 4	375	2	1 - 5
Neuropsychiatric/Sensory Disease	104	2	1 - 10	129	3	0 - 11
Urologic Disease	183	0	1 - 5	104	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	366
Occupancy Rate (%):	67
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	120
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	34
Registered Nurses:	418
Licensed Practical Nurses:	50

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ROLLING HILL HOSP/DIAGNOSTIC CTR

60 E TOWNSHIP LINE
ELKINS PARK, PA 19117

Medicare Hospital Provider Number: 390007

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,782	10	9 - 13	1,949	9	9 - 14
Cancer	50	26	26 - 54	64	38	31 - 58
Cerebrovascular Accidents	82	13	20 - 37	61	16	18 - 39
Gastrointestinal Catastrophes	16	31	12 - 58	12	33	14 - 66
Infectious Disease	25	36	18 - 57	16	25	14 - 59
Metabolic/Electrolyte Disorders	27	30	10 - 49	35	34	15 - 50
Pulmonary Disease	84	24	18 - 39	70	24	18 - 41
Renal Failure	1	100	2 - 97	10	20	19 - 79
Severe Acute Heart Disease	54	44	27 - 54	71	32	29 - 52
Severe Chronic Heart Disease	104	19	14 - 30	86	20	16 - 34
Severe Trauma	1	0	0 - 97	1	0	1 - 97
Gastrointestinal Disease	127	5	1 - 11	129	2	1 - 8
Gynecologic Disease	30	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	282	2	2 - 6	301	2	2 - 6
Musculoskeletal/Skin Conditions	120	2	1 - 10	158	1	1 - 7
Neuropsychiatric/Sensory Disease	151	0	1 - 6	174	2	1 - 8
Urologic Disease	99	0	0 - 7	110	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#): 280
Ownership/Control: Private, Non-profit

STAFFING

Interns and Residents: 20
Registered Nurses: 178
Licensed Practical Nurses: 58

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

Rolling Hill Hospital
60 E. Township Line Road
Elkins Park, Pennsylvania 19117
Telephone (215) 663-6000

Frederick L. Hollander, FACHE
Executive Director

October 12, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington, D.C. 20201

Dear Dr. Roper:

Thank you for the opportunity to comment on Rolling Hill Hospital's mortality data for 1987, to be published by HCFA later this year.

The governing board, administration, medical and professional staffs of Rolling Hill Hospital are committed to providing care that is of the highest quality possible. While we applaud several changes this year to improve the adjustment of mortality data for release to the general public as an indicator of quality of care, we maintain as in years past that a measurement of mortality is not an adequate measurement of care.

At Rolling Hill Hospital, we employ a rigorous quality assurance program wherein each patient's care is monitored and reviewed by medical staff and qualified health professionals.

We acknowledge that our mortality statistics fall well within the standard ranges set by HCFA. Indeed, in only one category (Renal Failure) does our mortality rate exceed the norm; in this instance, one chronically ill 80-year- old woman represented the only applicable case during this reporting period.

Yet we are reminded and would like to remind others that this relatively simple evaluation of only some data is limited in what may be concluded about patient care. The release of this information to the general public further limits its usefulness, as the layman does not possess the clinical knowledge to fully understand this data and place it in proper perspective.

We will continue to evaluate, maintain and improve the quality of patient care at Rolling Hill Hospital systematically, using established standards and indicators -- including mortality data. But just as health cannot be measured simply by whether or not a patient is alive, health care cannot be measured solely by examining mortality rates.

We welcome the opportunity to comment on these data.

Sincerely,

Frederick L. Hollander

cc: Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

ROXBOROUGH MEM HOSP

5800 RIDGE AVENUE
PHILADELPHIA, PA 19128

Medicare Hospital Provider Number: 390135

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,712	12	11 - 16	1,682	11	11 - 15
Cancer	52	35	28 - 56	47	36	28 - 58
Cerebrovascular Accidents	96	23	17 - 35	87	23	18 - 38
Gastrointestinal Catastrophes	23	26	21 - 60	31	32	22 - 59
Infectious Disease	49	35	20 - 51	32	34	25 - 60
Metabolic/Electrolyte Disorders	20	15	11 - 48	26	8	12 - 41
Pulmonary Disease	123	22	18 - 36	103	16	16 - 34
Renal Failure	9	44	17 - 82	9	11	16 - 74
Severe Acute Heart Disease	69	48	27 - 52	64	33	25 - 49
Severe Chronic Heart Disease	109	18	17 - 33	106	20	15 - 32
Severe Trauma	4	0	4 - 71	6	33	4 - 74
Gastrointestinal Disease	124	4	1 - 11	127	2	1 - 9
Gynecologic Disease	10	0	0 -100	22	5	0 -100
Low-Risk Heart Disease	225	1	2 - 6	215	4	1 - 8
Musculoskeletal/Skin Conditions	164	2	2 - 7	136	2	1 - 8
Neuropsychiatric/Sensory Disease	52	0	0 - 12	66	2	0 - 13
Urologic Disease	59	0	0 - 13	72	0	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	162
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	141
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	0
Registered Nurses:	205
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ROXBOROUGH
MEMORIAL HOSPITAL
5800 Ridge Avenue · Philadelphia, PA 19128
215-483-9900

October 25, 1988

Health Standards and Quality Bureau, HCFA
ATTN: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

To Whom It May Concern:

We have reviewed the Medicare Hospital Mortality Information for 1987 which you are planning to publish in December, 1988. We would like to submit the following comments as they pertain to the data for our institution:

- Significant complications such as severe acute heart disease in a patient whose principal diagnosis was in another category are not reported as co-morbidity factors in the cause of death.
- Severity of illness at time of admission is not reported and could be a significant factor in cause of death.
- Multiple organ system failure is not given additional weight in evaluating outcome of a patient.
- Although we understand that you were attempting to create risk-homogeneous groups, we feel that it is important for the public to be aware that all of the ICD-9-CM codes ordinarily associated with a certain category may not be included therein; for example, carcinomas of the small bowel, bladder, colon, rectum and liver are not included in the cancer category.

Thank you for this opportunity to reply. We urge you to continue your refinement of the analytical methodologies used in this process in order to produce more accurate and useful information for hospitals and consumers alike.

Sincerely,

Marvin Mashner
President

MM:cb

SACRED HEART HOSP

9TH WILSON STS
CHESTER, PA 19013

Medicare Hospital Provider Number: 390148

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,146	15	10 - 15	1,257	13	9 - 15
Cancer	46	41	25 - 56	39	38	24 - 56
Cerebrovascular Accidents	39	33	13 - 43	46	22	15 - 40
Gastrointestinal Catastrophes	10	40	6 - 65	9	44	7 - 68
Infectious Disease	20	55	16 - 59	13	46	10 - 62
Metabolic/Electrolyte Disorders	43	37	12 - 45	35	20	8 - 40
Pulmonary Disease	57	19	13 - 36	61	34	11 - 38
Renal Failure	3	33	2 - 87	9	56	13 - 79
Severe Acute Heart Disease	40	42	22 - 53	55	45	25 - 52
Severe Chronic Heart Disease	67	18	15 - 35	74	20	16 - 36
Severe Trauma	2	50	2 - 92	3	0	2 - 80
Gastrointestinal Disease	63	2	1 - 13	85	0	2 - 7
Gynecologic Disease	7	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	122	5	1 - 12	149	4	1 - 9
Musculoskeletal/Skin Conditions	77	3	0 - 15	82	5	0 - 20
Neuropsychiatric/Sensory Disease	36	14	0 - 40	30	3	0 - 60
Urologic Disease	38	0	0 - 46	55	4	0 - 47

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	236
Occupancy Rate (%):	79
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	166
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	0
Registered Nurses:	176
Licensed Practical Nurses:	57

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SACRED HEART HOSP

1430 DEKALB ST
NORRISTOWN, PA 19401

Medicare Hospital Provider Number: 390159

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,715	11	9 - 13	1,791	10	9 - 14
Cancer	54	44	26 - 55	54	43	27 - 56
Cerebrovascular Accidents	60	23	17 - 39	79	28	18 - 39
Gastrointestinal Catastrophes	12	58	15 - 69	16	25	19 - 63
Infectious Disease	19	42	16 - 60	13	31	12 - 62
Metabolic/Electrolyte Disorders	24	33	11 - 51	31	10	9 - 38
Pulmonary Disease	66	29	14 - 38	80	14	15 - 34
Renal Failure	4	25	13 - 89	2	50	5 - 94
Severe Acute Heart Disease	59	31	27 - 52	68	44	28 - 53
Severe Chronic Heart Disease	108	20	13 - 30	123	16	15 - 30
Severe Trauma	4	25	2 - 81	3	67	5 - 87
Gastrointestinal Disease	118	5	1 - 12	139	4	1 - 11
Gynecologic Disease	9	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	234	4	2 - 8	272	2	2 - 6
Musculoskeletal/Skin Conditions	163	2	1 - 7	192	4	1 - 8
Neuropsychiatric/Sensory Disease	41	7	0 - 72	53	2	0 - 22
Urologic Disease	73	0	0 - 10	63	0	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 260
Occupancy Rate (%): 61
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 287
Percent of Physicians Who Are Board Certified Specialists: 70
Interns and Residents: 0
Registered Nurses: 184
Licensed Practical Nurses: 71

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

SACRED HEART HOSPITAL
AND
REHABILITATION CENTER

1430 DEKALB ST., NORRISTOWN, PA.
PHONE: 278-8200

October 21, 1988

Health Care Financing Administration
Health Standards & Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, MD 21207

Re: HCFA Mortality Data Comments

Dear Sirs:

In accordance with the letter from William L. Roper, M.D. dated September 15, 1988, enclosed please find the comments of Sacred Heart Hospital, Norristown, PA (Medicare Provider #390159) on the 1987/1986 HCFA Mortality Data which we would request be incorporated with the planned December, 1988 publication of this information.

Also attached is supporting documentation which makes one technical correction with respect to a date of death which we do not wish to be published. It involves patient [redacted] who is listed under the [redacted] as having a date of death [redacted] The correct date of death should be [redacted] and attached is a copy of the death certificate relating to this patient.

Thank you for the opportunity to submit these comments.

Sincerely,

J. Russell Walsh

J. Russell Walsh
Executive Vice President

JRW/mc

enc.

SACRED HEART HOSPITAL
AND
REHABILITATION CENTER

1430 DeKALB ST., NORRISTOWN, PA.
PHONE: 278-8200

Comments on the HCFA Mortality Data
Sacred Heart Hospital, Norristown PA
Medicare provider # 390159

Sacred Heart Hospital appreciates the opportunity to comment on the mortality data which the Health Care Financing Administration has supplied on our Medicare Patients. We were pleased to note that Sacred Heart Hospitals statistics fall within the predicted range in all categories for both the 1986 and 1987 data.

As stated in our comments of last years data release, Sacred Heart Hospital believes that caution should be used in terms of anyone reaching either general or specific conclusions about quality of care from mortality data alone for this hospital or any other institution. Although the methodology utilized to compute this data has been refined, it still lacks the key characteristics necessary to differentiate between varying severity of patients treated at a particular institution. Some key factors affecting the condition of a patient or their expected outcome which are not included in the model utilized by HCFA include a valid measure of severity (i.e. how sick the patient was at the time of admission), whether the patient was transferred to the hospital from a nursing home, whether the patient had a terminal illness, or the patients general health status.

Knowing the limitations of mortality data alone as a sole or valid quality indicator, Sacred Heart Hospital and its Medical Staff have developed and maintained for many years a formalized and intensive internal program of reviewing, analyzing and improving the quality of care provided to all of its patients. This program of peer review is based upon the standards of the Joint Commission on the accreditation of Health Care Organizations, Medicare peer review requirements, various licensing bodies and other entities involved in the review and improvement of medical care. Peer review is performed on an ongoing basis and involves all of the departments within the hospital. The program is based on many different criteria against which the care of individual patients is compared, taking into account all of the significant factors related to their specific circumstances. If specific situations or patterns are identified, further indepth analysis is accomplished and corrective action is initiated. All deaths are individually reviewed as part of the hospital´s peer review and quality assurance program to focus on potential areas of improvement. Each case is analyzed because at the time of admission of many patients, particularly patients in the Medicare population which this data exclusively addresses, death is the expected outcome and medical intervention will not alter that outcome.

Data Accuracy

To the extent that the hospital has the ability to check the raw data which are included in the information from HCFA, there is one technical correction that should be made and this has been communicated separately to HCFA. This involves an incorrect notation of a date of death which does not appear to affect the basic data.

SACRED HEART HOSP

421 CHEW ST
ALLENTOWN, PA 18102

Medicare Hospital Provider Number: 390197

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,073	10	10 - 14	2,024	11	10 - 14
Cancer	99	49	29 - 53	116	38	26 - 48
Cerebrovascular Accidents	74	23	15 - 36	67	28	15 - 38
Gastrointestinal Catastrophes	20	20	15 - 54	16	50	14 - 62
Infectious Disease	24	25	16 - 54	32	28	20 - 55
Metabolic/Electrolyte Disorders	22	18	15 - 52	38	18	14 - 45
Pulmonary Disease	78	24	18 - 40	71	20	15 - 37
Renal Failure	10	50	15 - 78	5	20	7 - 79
Severe Acute Heart Disease	75	36	27 - 51	88	40	31 - 53
Severe Chronic Heart Disease	108	19	15 - 31	108	10	15 - 29
Severe Trauma	1	0	1 - 97	1	0	3 - 99
Gastrointestinal Disease	152	2	1 - 8	157	3	1 - 8
Gynecologic Disease	18	0	0 -100	18	0	0 -100
Low-Risk Heart Disease	276	1	2 - 6	252	3	1 - 6
Musculoskeletal/Skin Conditions	186	1	1 - 6	182	1	1 - 6
Neuropsychiatric/Sensory Disease	113	3	0 - 12	115	2	0 - 11
Urologic Disease	63	2	0 - 16	43	0	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	236
Occupancy Rate (%):	70
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	236
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	19
Registered Nurses:	215
Licensed Practical Nurses:	34

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SACRED HEART HOSPITAL

421 Chew Street
Allentown, PA
18102

39-0197
Medicare Provider Number

October 24, 1988

Health Standards and Quality Bureau
HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Mrs. Sandra Kappert

SUBJECT: Mortality Data

We appreciate the opportunity to review and comment on mortality data related to Medicare patients of Sacred Heart Hospital in 1986 as proposed to be released by HCFA during December 1988.

We have reviewed the data and find that it again reflects rather closely our internal data in terms of mortality. We would continue to stress, however, that mortality rates alone cannot be used to judge quality of care, and that although significant improvements have been made in refining the data, other characteristics must be factored into any such formula for quality to be appropriately reflected.

Sincerely,

Kenneth G. Turner
Senior Vice President

MD6:1990

SAINT VINCENT HEALTH CENTER

232 WEST 25TH STREET
ERIE, PA 16544

Medicare Hospital Provider Number: 390009

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,983	11	9 - 13	4,100	11	9 - 13
Cancer	168	39	30 - 50	157	38	31 - 52
Cerebrovascular Accidents	140	24	18 - 34	166	27	19 - 35
Gastrointestinal Catastrophes	39	28	20 - 53	35	20	19 - 51
Infectious Disease	43	33	21 - 52	50	36	22 - 52
Metabolic/Electrolyte Disorders	46	20	10 - 39	40	25	10 - 42
Pulmonary Disease	175	27	18 - 35	165	19	18 - 35
Renal Failure	19	37	12 - 67	16	44	17 - 75
Severe Acute Heart Disease	130	40	28 - 48	143	39	29 - 47
Severe Chronic Heart Disease	186	26	16 - 31	181	25	16 - 31
Severe Trauma	6	33	4 - 74	12	42	4 - 62
Gastrointestinal Disease	256	4	2 - 7	283	4	1 - 7
Gynecologic Disease	31	0	0 -100	25	0	0 -100
Low-Risk Heart Disease	542	4	2 - 6	549	4	2 - 6
Musculoskeletal/Skin Conditions	378	2	1 - 5	395	2	1 - 5
Neuropsychiatric/Sensory Disease	160	1	1 - 7	163	2	0 - 8
Urologic Disease	163	1	0 - 8	153	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	580
Occupancy Rate (%):	65
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	225
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	22
Registered Nurses:	515
Licensed Practical Nurses:	86

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Saint Vincent
Health Center

232 West 25 Street
Erie, Pennsylvania 16544
814/452-5000

HOSPITAL ID: 390009

October 19, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health & Human Services
Washington, DC 20201

Dear Doctor Roper:

Again, the Health Care Financing Administration (HCFA) has compiled and published gross mortality statistics on Medicare patients in individual hospitals. And just as last year, you have called on hospitals for comments about this process.

Let it first be said that we appreciate HCFA's efforts. Saint Vincent has long supported in theory and practice the concept of quality assessment. But we also thank you for the opportunity to comment since the risk of misinterpretation of your data is exceedingly high.

We have reviewed the most recent Saint Vincent data provided by your organization and find that it is seemingly accurate, with the exception of the hospital characteristics (see addendum). But once again, the data lacks appropriate adjustments for severity of illness, which is the most important predictor of death.[1] In other words, without the ability to judge the severity of patients' conditions it is impossible to determine appropriate vs. inappropriate death (i.e., high quality vs. low quality care). Therefore, gross statistics such as those published by HCFA cannot indicate whether the care given was of high or low quality.

Herein lies the problem. The HCFA statistics give Saint Vincent and other health care institutions another means of checks and balances in quality assessment, and should be used as such. However, the public is tempted to use these statistics to make hospital comparisons on the issue of quality. The only use these statistics seem to have for the general public is in the knowledge that the hospital industry is working to better its means of assessing and controlling quality for the sake of all patients.

As in the past, Saint Vincent and its medical staff agree with HCFA's premise that quality of care should be measured and that outcome assessment is reasonable. But we remain firm in our belief and knowledge of the data's limitations because of the lack of appropriate severity measures.

Just as before, Saint Vincent will incorporate the HCFA data in its present quality review system, which includes the following:

1.) Peer review;
2.) Mortality reviews by individual medical departments;
3.) Mechanisms for suspending physicians practicing inappropriate care;
4.) Medisgroups (Medical Illness Severity Grouping System); and
5.) Other hospital quality assurance functions.

Thank you again for the opportunity to comment on this matter.

Sincerely,

SAINT VINCENT HEALTH CENTER

Sr Margaret Ann Hardner

Sr. Margaret Ann Hardner
President

Enc.

SCRANTON STATE GNRL HOSP

201 MULBERRY STREET
SCRANTON, PA 18501

Medicare Hospital Provider Number: 390188

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	403	16	9 - 17	510	15	9 - 17
Cancer	0	-	-	9	33	19 - 76
Cerebrovascular Accidents	16	38	8 - 54	19	21	13 - 51
Gastrointestinal Catastrophes	5	40	5 - 78	5	40	5 - 78
Infectious Disease	7	57	11 - 75	5	40	6 - 78
Metabolic/Electrolyte Disorders	4	50	1 - 85	7	14	1 - 68
Pulmonary Disease	34	32	10 - 43	40	22	13 - 41
Renal Failure	7	71	11 - 78	8	50	10 - 77
Severe Acute Heart Disease	17	65	24 - 68	20	55	17 - 59
Severe Chronic Heart Disease	29	17	11 - 40	48	38	9 - 38
Severe Trauma	1	0	0 -100	0	-	-
Gastrointestinal Disease	28	0	0 - 23	33	9	1 - 33
Gynecologic Disease	3	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	37	5	0 - 28	60	3	1 - 16
Musculoskeletal/Skin Conditions	45	2	0 - 30	54	2	0 - 17
Neuropsychiatric/Sensory Disease	11	0	0 -100	16	0	0 - 87
Urologic Disease	21	5	0 - 90	19	5	0 - 47

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 61
Occupancy Rate (%): 62
Ownership/Control: State Government

STAFFING

Total Number of Physicians: 141
Percent of Physicians Who Are Board Certified Specialists: 72
Interns and Residents: 0
Registered Nurses: 68
Licensed Practical Nurses: 14

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

SEIDLE MEM HOSP

FILBERT SIMPSON STS
MECHANICSBURG, PA 17055

Medicare Hospital Provider Number: 390014

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	90	11	8 - 22	192	10	9 - 18
Cancer	1	0	1 - 97	3	33	7 - 88
Cerebrovascular Accidents	3	33	5 - 86	11	36	12 - 65
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	3	0	9 - 82	4	25	6 - 80
Metabolic/Electrolyte Disorders	2	0	1 - 92	2	50	0 - 96
Pulmonary Disease	9	22	6 - 61	11	18	5 - 55
Renal Failure	0	-	-	1	100	3 -100
Severe Acute Heart Disease	7	57	10 - 74	15	7	25 - 58
Severe Chronic Heart Disease	5	60	4 - 77	9	22	3 - 62
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	3	0	0 -100	13	0	0 - 66
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	20	0	0 - 36	25	4	1 - 31
Musculoskeletal/Skin Conditions	10	0	0 -100	29	0	0 - 34
Neuropsychiatric/Sensory Disease	7	0	0 -100	7	0	0 -100
Urologic Disease	1	0	0 -100	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	56
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	48
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	0
Registered Nurses:	23
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SEIDLE MEMORIAL HOSPITAL
A CAPITAL HEALTH SYSTEM HOSPITAL
120 SOUTH FILBERT STREET
MECHANICSBURG, PENNSYLVANIA 17055-6591

#390014

October 21, 1988

TO: Health Care Financing Administration

FROM: Seidle Memorial Hospital

SUBJECT: Mortality Rates

After close review of our mortalities for 1987 we have the following:

4 cases were no resuscitation

2 cases were discharged and returned within 30 days in full cardiac arrest. One was cardiac arrest within the facility and one expired at another acute facility.

Due to the small case load, the predicted range is meaningless for our facility.

Thank You,
Vignon Smeigh
Vignon Smeigh
Manager of Medical Records

SEWICKLEY VALLEY HOSPITAL

720 BLACKBURN ROAD
SEWICKLEY, PA 15143

Medicare Hospital Provider Number: 390037

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,356	11	10 - 14	2,299	12	10 - 14
Cancer	81	44	31 - 56	70	39	30 - 56
Cerebrovascular Accidents	88	22	16 - 35	96	23	18 - 36
Gastrointestinal Catastrophes	12	50	13 - 66	12	42	11 - 65
Infectious Disease	22	18	21 - 57	15	53	19 - 68
Metabolic/Electrolyte Disorders	24	29	10 - 50	21	24	12 - 52
Pulmonary Disease	143	20	17 - 34	141	28	17 - 35
Renal Failure	8	50	10 - 77	13	38	18 - 78
Severe Acute Heart Disease	82	32	26 - 49	111	41	26 - 47
Severe Chronic Heart Disease	118	20	16 - 32	145	22	15 - 31
Severe Trauma	2	50	2 - 92	3	0	2 - 80
Gastrointestinal Disease	172	2	1 - 7	144	1	1 - 7
Gynecologic Disease	20	0	0 -100	23	0	0 -100
Low-Risk Heart Disease	197	5	1 - 9	210	5	1 - 8
Musculoskeletal/Skin Conditions	330	2	1 - 6	305	2	0 - 6
Neuropsychiatric/Sensory Disease	80	5	1 - 15	85	0	0 - 7
Urologic Disease	95	1	0 - 11	98	3	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	199
Occupancy Rate (%):	83
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	130
Percent of Physicians Who Are Board Certified Specialists:	78
Interns and Residents:	0
Registered Nurses:	258
Licensed Practical Nurses:	76

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SHADYSIDE HOSPITAL

5230 CENTRE AVE
PITTSBURGH, PA 15232

Medicare Hospital Provider Number: 390055

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,608	9	10 - 13	4,616	10	10 - 13
Cancer	171	32	32 - 52	182	36	34 - 53
Cerebrovascular Accidents	127	20	20 - 36	129	19	20 - 36
Gastrointestinal Catastrophes	39	28	24 - 57	24	21	20 - 56
Infectious Disease	42	29	22 - 52	41	39	22 - 55
Metabolic/Electrolyte Disorders	59	20	16 - 43	58	29	17 - 46
Pulmonary Disease	154	26	17 - 35	139	24	18 - 36
Renal Failure	20	60	19 - 73	18	39	18 - 74
Severe Acute Heart Disease	205	33	27 - 43	180	43	29 - 46
Severe Chronic Heart Disease	229	17	17 - 29	200	22	18 - 32
Severe Trauma	8	25	8 - 68	8	38	7 - 70
Gastrointestinal Disease	274	1	2 - 6	289	3	2 - 7
Gynecologic Disease	36	8	0 - 45	46	0	0 - 82
Low-Risk Heart Disease	1,117	4	2 - 5	1,044	5	3 - 6
Musculoskeletal/Skin Conditions	376	2	1 - 5	394	3	1 - 6
Neuropsychiatric/Sensory Disease	124	4	1 - 11	137	2	1 - 8
Urologic Disease	150	1	0 - 7	137	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 416
Occupancy Rate (%): 83
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 263
Percent of Physicians Who Are Board Certified Specialists: 84
Interns and Residents: 70
Registered Nurses: 485
Licensed Practical Nurses: 35

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

SHADYSIDE
HOSPITAL

5230 Centre Avenue
Pittsburgh, Pennsylvania 15232
412/622-2010

Henry A. Mordoh
President

MEDICARE PROVIDER NUMBER 390055

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

In preparation for the December publication of the Medicare Hospital Mortality Information, Shadyside Hospital has compiled the enclosed response following extensive review of the hospital data and characteristics. I would like to request that the comments be used as they are written, and that they be used in entirety in your final publication following hospital-specific information, as was described in your letter of September 15, 1988.

The importance of including the hospital's response to such publication of data cannot be overemphasized and I appreciate the inclusion of our response and comments.

Sincerely,

Henry A. Mordoh
President

HAM:BJE/rlm

Enclosure

SHADYSIDE HOSPITAL
Pittsburgh, Pennsylvania
RESPONSE TO HCFA MORTALITY STATISTICS

SHADYSIDE
HOSPITAL

5230 Centre Avenue
Pittsburgh, Pennsylvania 15232
412/622-2121

Medicare Provider Number 390055

INTRODUCTION:

Shadyside Hospital is a 474-bed tertiary regional referral center, community hospital, and teaching institution located in Pittsburgh, Pennsylvania, with a medical staff of 404-affiliated physicians and over 1,700 employees.

The Hospital's major specialties include Cardiology, Cardiothoracic Surgery, Endocrinology, Family Practice, Geriatric Health Services, Internal Medicine, Neurosciences, Oncology, Orthopedics, and Pulmonary Medicine. Approximately 33% of the Hospital's admissions are for cardiac disorders and generate from areas outside the immediate service area, including Western Pennsylvania, parts of Ohio and West Virginia.

The Hospital had 15,580 discharges in Fiscal Year 1988, and the seven day occupancy of set-up and staffed beds averaged slightly higher than 84%. Patients over the age of 65 totaled 47.5%.

CONCERNS WITH METHODOLOGY:

As in last year's mortality statistics analysis, there remains to be significant concern with the methodology developed for the release of mortality statistics on Medicare patients. Major concerns are:

1. The HCFA model does not account for the stage of the patient's disease on admission, nor of the severity.

2. There is no evidence available to demonstrate the statistical validity of the range of predicted mortality rates and the use of six (6) months of data to determine the ranges.

3. The data covers 14 months of information rather than one (1) year and includes admissions in December, 1986, who died within thirty (30) days, and patients who were admitted in December, 1987, and died in January, 1988.

4. Patients who died following discharge may have succumbed to medical conditions or circumstances unrelated to their hospitalizations and this information is not reflected in the data. While it may be HCFA's wish to demonstrate a linkage between the care rendered in an institution and the patient's death, the two (2) occasions are not necessarily synonymous.

5. Patients transferred for continued care from a non-tertiary to a tertiary facility and counted as deaths in the tertiary facility may affect the accuracy of reports from both facilities and detract from the ability to evaluate quality within either institution.

INCLUSIONS OF HOSPITAL CHARACTERISTICS:

The addition of hospital characteristics to the morbidity data this year serves to increase the reader's understanding of the size and complexity of a facility. However, even with such data taken directly from the 1986 AHA Annual Survey of Hospitals, the information is misleading to the reader as the categories are not sufficiently defined and in some cases, the figures have been used out of context. The publishing of 1986 data is not only dated but is not truly reflective of the entire facility.

Although Tim Carr of the Health Standards Bureau has indicated that 1987 characteristics are to be substituted for 1986 characteristics prior to the December 17 release, the publication of any data which will not first be distributed to the hospital for review poses a potential threat to accuracy.

Specific concerns regarding hospital characteristics are as follows:

1. Bed number of 404 reflects only general medical/surgical beds. Since all critical care and obstetrical beds are excluded, this number does not truly reflect the size of Shadyside Hospital, with 474 licensed beds.

2. The occupancy rate of 73% reflects a rate calculated from the HCFA bed number only, and again excludes occupancy information related to a large number of critical care beds.

3. Because the percentage of board certified physician specialists listed at 70% is considerably lower than the 81% reported by Shadyside Hospital for the period, the methodology used to compute that number is not clear. In addition, included in that figure are all emeritus, inactive, and courtesy physicians. Board certified active staff are actually calculated to be 90%.

4. While counts of RN's and LPN's match the figures submitted in the survey, the number is not meaningful unless there is additional information regarding the percentage of nurses devoted to patient care.

LIMITATIONS OF STUDY:

Shadyside Hospital is a tertiary care facility with a high volume of patient referrals including a significant volume of patients received as emergency transfers and needing surgery within 24 hours of admission. Although Shadyside Hospital is well within the predicted range of mortality rates in all diagnostic categories as defined by the model, it is our opinion that identifying mortality alone as an indicator of quality is of limited value.

Shadyside Hospital has an active Quality Assurance program designed to continuously monitor quality indicators in the provision of patient care, and to assure that optimum standards of care are maintained. Mortalities are routinely reviewed as a component of this program. The HCFA data to be released in December does not add to our ability to measure, monitor or improve our standards of care and could be misleading to the public. If, the intent of HCFA is to provide the public with a useful tool for assessing the quality of care in an institution, mortality data alone does not successfully achieve that goal.

SHAMOKIN STATE GENERAL HOSPITAL

ROUTE 2
SHAMOKIN, PA 17872

Medicare Hospital Provider Number: 390189

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	799	15	10 - 16	820	14	11 - 17
Cancer	13	62	21 - 71	17	76	26 - 68
Cerebrovascular Accidents	37	35	15 - 46	31	42	13 - 48
Gastrointestinal Catastrophes	5	20	10 - 77	6	50	8 - 76
Infectious Disease	8	38	13 - 73	9	22	14 - 69
Metabolic/Electrolyte Disorders	13	15	4 - 52	13	31	9 - 59
Pulmonary Disease	54	22	12 - 37	57	26	14 - 40
Renal Failure	2	100	6 - 90	5	60	18 - 93
Severe Acute Heart Disease	70	39	26 - 50	57	32	28 - 54
Severe Chronic Heart Disease	58	29	11 - 36	60	18	13 - 34
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	55	2	1 - 15	55	2	1 - 13
Gynecologic Disease	6	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	147	4	1 - 9	150	3	2 - 8
Musculoskeletal/Skin Conditions	41	2	0 - 26	37	3	0 - 73
Neuropsychiatric/Sensory Disease	11	0	0 - 96	25	4	0 - 38
Urologic Disease	35	0	0 - 49	38	3	0 - 88

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	72
Occupancy Rate (%):	(not available)
Ownership/Control:	State Government

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

SHARON GENERAL HOSPITAL

740 EAST STATE STREET
SHARON, PA 16146

Medicare Hospital Provider Number: 390211

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,652	11	11 - 16	1,910	11	11 - 15
Cancer	62	37	32 - 59	52	52	31 - 61
Cerebrovascular Accidents	86	23	18 - 38	61	28	19 - 43
Gastrointestinal Catastrophes	17	24	16 - 59	14	43	17 - 67
Infectious Disease	28	32	17 - 54	18	17	20 - 59
Metabolic/Electrolyte Disorders	42	24	18 - 49	45	18	17 - 46
Pulmonary Disease	96	21	18 - 37	92	21	16 - 36
Renal Failure	1	0	2 - 97	4	50	15 - 95
Severe Acute Heart Disease	58	38	30 - 56	81	41	28 - 51
Severe Chronic Heart Disease	86	19	13 - 31	114	23	16 - 33
Severe Trauma	1	0	0 - 97	0	-	-
Gastrointestinal Disease	132	5	1 - 11	170	2	1 - 8
Gynecologic Disease	18	0	0 -100	16	0	0 - 93
Low-Risk Heart Disease	189	2	2 - 7	242	1	2 - 6
Musculoskeletal/Skin Conditions	112	2	1 - 9	160	2	1 - 7
Neuropsychiatric/Sensory Disease	30	0	0 - 29	46	0	0 - 14
Urologic Disease	115	1	0 - 8	133	0	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	186
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	64
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	0
Registered Nurses:	168
Licensed Practical Nurses:	33

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SHARON
GENERAL
HOSPITAL

Wayne W. Johnston, Preside

October 20, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Gentlemen:

Sharon General Hospital is a full service facility of 220 acute care and 40 Long Term Care beds. Specialty services include a Coronary Care Unit and a Hospice Program.

The 1987 mortality rate for Sharon General Hospital credits the facility with forty-three (43) deaths which actually occurred after discharge.

Sharon General Hospital has an ongoing Quality Assurance Program which monitors and evaluates all aspects of patient care. This program serves to assure that Sharon General Hospital is continually taking action to improve patient care and assess effectiveness.

The Medical Staff at Sharon General reviews each mortality on a concurrent basis to assure that the patient received appropriate care. During these reviews, all aspects of the patient's illness are considered including non-quantifiable factors. Mortality statistics alone cannot be used to make judgements about the quality of care rendered at the facility.

Through the implementation of new services such as MRI Imaging, Trauma Response Team, and Laser Surgery, Sharon General Hospital continually addresses the needs of our population and strives to provide optimal patient outcome.

Sincerely,

C. Michael Rutherford
Vice President for Operations

CMR:cyf

740 East State Street
Sharon, Pennsylvania 16146

(412) 983-3911

SHENANGO VALLEY MEDICAL CNTR

2200 MEMORIAL DRIVE
FARRELL, PA 16121

Medicare Hospital Provider Number: 390165

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	970	12	9 - 15	1,001	11	10 - 15
Cancer	25	52	27 - 66	26	65	36 - 74
Cerebrovascular Accidents	34	26	16 - 46	27	33	14 - 50
Gastrointestinal Catastrophes	5	80	13 - 80	9	22	10 - 65
Infectious Disease	7	57	15 - 79	12	42	19 - 72
Metabolic/Electrolyte Disorders	18	28	10 - 54	13	23	7 - 56
Pulmonary Disease	82	23	13 - 34	83	16	15 - 34
Renal Failure	11	45	15 - 77	8	63	20 - 86
Severe Acute Heart Disease	22	55	19 - 60	22	41	19 - 59
Severe Chronic Heart Disease	57	19	13 - 35	48	27	12 - 38
Severe Trauma	1	100	0 - 98	0	-	-
Gastrointestinal Disease	76	4	1 - 14	65	5	0 - 19
Gynecologic Disease	9	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	165	1	2 - 7	171	1	2 - 6
Musculoskeletal/Skin Conditions	109	2	1 - 9	103	2	1 - 9
Neuropsychiatric/Sensory Disease	19	0	0 - 95	22	0	0 - 61
Urologic Disease	30	0	0 - 59	44	5	0 - 34

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 104
Occupancy Rate (%): 64
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 41
Percent of Physicians Who Are Board Certified Specialists: 41
Interns and Residents: 8
Registered Nurses: 109
Licensed Practical Nurses: 23

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

SOLDIERS & SAILORS MEMORIAL HOSP

32-36 CENTRAL AVE
WELLSBORO, PA 16901

Medicare Hospital Provider Number: 390043

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	915	11	9 - 14	971	14	9 - 14
Cancer	16	69	24 - 69	22	91	34 - 64
Cerebrovascular Accidents	41	39	16 - 46	40	30	13 - 42
Gastrointestinal Catastrophes	6	33	5 - 73	7	71	10 - 73
Infectious Disease	11	9	13 - 56	3	33	8 - 88
Metabolic/Electrolyte Disorders	19	26	11 - 54	15	33	7 - 56
Pulmonary Disease	52	17	14 - 38	51	33	12 - 40
Renal Failure	2	50	4 - 93	6	67	9 - 80
Severe Acute Heart Disease	40	45	25 - 56	40	35	23 - 54
Severe Chronic Heart Disease	53	26	13 - 38	52	29	14 - 40
Severe Trauma	0	-	-	5	20	5 - 75
Gastrointestinal Disease	94	1	1 - 8	115	3	1 - 11
Gynecologic Disease	9	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	121	2	2 - 8	112	2	2 - 8
Musculoskeletal/Skin Conditions	88	1	0 - 11	84	4	0 - 19
Neuropsychiatric/Sensory Disease	45	4	0 - 49	46	0	0 - 14
Urologic Disease	29	0	0 - 23	31	0	0 - 61

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 127
Occupancy Rate (%): 50
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 35
Percent of Physicians Who Are Board Certified Specialists: 49
Interns and Residents: 0
Registered Nurses: 68
Licensed Practical Nurses: 37

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

SOMERSET COMMUNITY HOSPITAL

225 S CENTER AVENUE
SOMERSET, PA 15501

Medicare Hospital Provider Number: 390039

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,078	14	10 - 15	1,260	12	9 - 14
Cancer	19	42	25 - 69	16	50	22 - 69
Cerebrovascular Accidents	56	45	16 - 43	38	24	11 - 40
Gastrointestinal Catastrophes	2	50	2 - 92	10	40	15 - 72
Infectious Disease	12	8	14 - 54	9	11	16 - 64
Metabolic/Electrolyte Disorders	13	31	10 - 60	18	39	8 - 54
Pulmonary Disease	67	27	15 - 38	67	28	17 - 41
Renal Failure	2	100	7 - 91	0	-	-
Severe Acute Heart Disease	70	37	26 - 50	59	39	27 - 53
Severe Chronic Heart Disease	63	25	15 - 37	62	27	14 - 37
Severe Trauma	3	33	1 - 89	1	0	1 - 97
Gastrointestinal Disease	67	9	1 - 21	103	5	1 - 13
Gynecologic Disease	8	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	173	2	1 - 7	202	4	2 - 8
Musculoskeletal/Skin Conditions	91	5	0 - 18	110	3	1 - 10
Neuropsychiatric/Sensory Disease	30	3	0 - 55	61	3	0 - 24
Urologic Disease	37	5	0 - 67	47	4	0 - 29

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	166
Occupancy Rate (%):	52
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	44
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	77
Licensed Practical Nurses:	71

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Somerset Community Hospital
Somerset, Pennsylvania

Provider Number: 39-0039

The hospital's comments consisted primarily of annotations to the patient specific information and/or the hospital characteristics generated by the Health Care Financing Administration and provided to the hospital. We did not publish this annotated information.

SOUTH SIDE HOSP

2000 MARY ST
PITTSBURG, PA 15203

Medicare Hospital Provider Number: 390131

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,953	13	10 - 14	2,126	14	10 - 14
Cancer	54	39	24 - 53	70	49	27 - 54
Cerebrovascular Accidents	113	24	18 - 35	90	31	16 - 37
Gastrointestinal Catastrophes	16	38	11 - 59	19	32	19 - 62
Infectious Disease	12	50	12 - 65	19	42	17 - 62
Metabolic/Electrolyte Disorders	30	43	15 - 53	39	23	11 - 42
Pulmonary Disease	103	22	16 - 35	120	23	18 - 37
Renal Failure	10	40	22 - 85	8	38	12 - 79
Severe Acute Heart Disease	74	53	29 - 54	75	43	27 - 51
Severe Chronic Heart Disease	135	22	15 - 31	142	27	16 - 32
Severe Trauma	1	100	2 - 97	4	50	9 - 85
Gastrointestinal Disease	171	1	2 - 6	171	3	1 - 8
Gynecologic Disease	7	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	275	4	1 - 7	250	6	2 - 9
Musculoskeletal/Skin Conditions	247	3	1 - 7	254	3	1 - 7
Neuropsychiatric/Sensory Disease	61	5	0 - 33	126	2	1 - 8
Urologic Disease	53	2	0 - 35	63	3	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 175
Occupancy Rate (%): 78
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 206
Percent of Physicians Who Are Board Certified Specialists: 76
Interns and Residents: 0
Registered Nurses: 136
Licensed Practical Nurses: 62

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

The South Side Hospital
2000 Mary Street
Pittsburgh, PA 15203
412 488-5550

George J. Korbakes
President

Medicare Provider
No.: 390131

October 17, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

We have reviewed the "Medicare Hospital Mortality" statistics for The South Side Hospital submitted by your office. Reviewing the data has been most informative and educational in our continuing efforts to address the quality of care delivered at our Hospital.

Upon reviewing the data, we concluded that a clear picture of what is going on at our Hospital cannot be drawn by just reviewing these numbers. Each patient, as indicated in their respective medical record, has various characteristics which must be considered in assessing the appropriateness of care (e.g., age, medical conditions, medical history, etc.).

Therefore, we believe releasing this data to the "public" could be misleading, and we are unclear of the purpose you wish to accomplish.

After reviewing the medical records, in most cases we concur with the statistics in your report. Many of the patients were terminal, and the care given was appropriate. In one particular case, however, the patient was diagnosed as severe trauma. Retrospectively reviewing the chart, the patient should not have been diagnosed as severe trauma. The patient was admitted with aspiration pneumonia and was terminally ill. Had this patient been coded differently, it would have kept all of our "ranges for predicted mortality percentages" within the predicted ranges.

"We care for you . . .
for life."

Furthermore, review of the medical records included in your report indicate that many of the patients' conditions required multiple admissions. In many situations, death would have occurred due to the patients' having terminal conditions even prior to admission.

Since the time period covered by your report, 1986 and 1987, a number of changes have taken place at the Hospital, such as enhanced coding procedures, practice patterns, and technology. All of these raise question as to the timeliness of the information you plan to release.

In addition, we are disappointed with the inaccuracy of the "Hospital Characteristics" section. This information was reported to have been obtained from the 1986 AHA Survey. We reviewed our copy of the survey and the following errors should be corrected.

1. The Hospital's total beds were 215, not 164. Of the 215, 164 were medical/surgical, 20 Rehab, 20 Outpatient Surgery, 15 Intensive Care/Coronary Care (ICU/CCU), and 16 Coronary Monitoring beds. Your data indicated we had no coronary beds, and did not list the Rehab beds.

2. Our occupancy rate was 83%, not 72% based on 215 beds.

3. Of the 168 physicians which were on our staff, 128 were board certified or 76%, not 65%.

4. We do not have an Organ Transplant Service, your data indicated we do. Although, we do perform corneal transplants.

5. Finally, Registered Nurses and Licensed Practical Nurses per bed calculations were incorrect since our total beds were 215. We calculated Registered Nurses to be 0.75/bed and Licensed Practical Nurses to be 0.35/bed.

Should you have any questions concerning the above, please contact Dr. Rocco A. Vernino, Medical Director, Marcie S. Caplan, Director, Physician Services or me at (412) 488-5600.

Thank you.

Sincerely,

George J Korbakes

George J. Korbakes
President

GJK/ks

cc: Rocco A. Vernino, M.D.
Medical Director

Marcie S. Caplan
Director, Physician Services

Nancy Blichasz, R.N.,
Professional Services & Quality Assurance,
Hospital Association of PA

SOUTHERN CHESTER CTY MED CTR

1015 W BALTIMORE PK
WEST GROVE, PA 19390

Medicare Hospital Provider Number: 390220

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	795	12	11 - 16	759	10	10 - 16
Cancer	20	45	24 - 67	17	24	23 - 64
Cerebrovascular Accidents	26	23	12 - 46	31	23	19 - 49
Gastrointestinal Catastrophes	7	43	11 - 75	3	67	7 - 88
Infectious Disease	12	25	11 - 61	6	33	14 - 80
Metabolic/Electrolyte Disorders	13	8	11 - 50	18	17	13 - 53
Pulmonary Disease	84	19	16 - 36	49	29	16 - 43
Renal Failure	2	50	7 - 97	3	33	10 - 92
Severe Acute Heart Disease	24	42	18 - 57	24	54	23 - 62
Severe Chronic Heart Disease	63	27	14 - 37	58	10	14 - 32
Severe Trauma	2	50	2 - 92	3	33	3 - 86
Gastrointestinal Disease	34	0	0 - 18	46	0	1 - 12
Gynecologic Disease	3	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	85	1	1 - 9	112	4	1 - 10
Musculoskeletal/Skin Conditions	85	7	1 - 17	76	1	0 - 11
Neuropsychiatric/Sensory Disease	11	9	0 -100	22	0	0 - 68
Urologic Disease	26	0	0 - 77	26	0	0 - 48

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	77
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	66
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	64
Licensed Practical Nurses:	17

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST AGNES MED CNTR

1900 S BROAD ST
PHILADELPHIA, PA 19145

Medicare Hospital Provider Number: 390022

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,671	12	11 - 16	1,866	13	11 - 16
Cancer	43	40	33 - 64	73	42	33 - 59
Cerebrovascular Accidents	72	29	16 - 38	71	39	16 - 39
Gastrointestinal Catastrophes	26	27	18 - 55	19	21	19 - 59
Infectious Disease	29	52	20 - 58	25	48	23 - 63
Metabolic/Electrolyte Disorders	52	27	16 - 46	36	25	12 - 45
Pulmonary Disease	55	22	16 - 40	69	28	17 - 41
Renal Failure	13	23	12 - 69	18	33	19 - 74
Severe Acute Heart Disease	59	37	28 - 54	89	42	31 - 53
Severe Chronic Heart Disease	145	14	20 - 33	138	18	17 - 32
Severe Trauma	9	0	8 - 50	11	18	9 - 60
Gastrointestinal Disease	107	2	1 - 9	111	5	1 - 12
Gynecologic Disease	5	0	0 -100	4	0	0 - 99
Low-Risk Heart Disease	271	0	2 - 5	320	2	2 - 6
Musculoskeletal/Skin Conditions	131	3	1 - 9	137	3	1 - 9
Neuropsychiatric/Sensory Disease	45	4	0 - 31	47	4	0 - 26
Urologic Disease	55	0	0 - 17	51	0	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 230
Occupancy Rate (%): 77
Ownership/Control: Church

STAFFING

Total Number of Physicians: 213
Percent of Physicians Who Are Board Certified Specialists: 68
Interns and Residents: 0
Registered Nurses: 116
Licensed Practical Nurses: 25

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: Yes
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: Yes
Hospice Care: No

ST CLAIR MEM HOSP

1000 BOWER HILL RD
PITTSBURGH, PA 15243

Medicare Hospital Provider Number: 390228

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,709	13	11 - 15	3,791	13	11 - 15
Cancer	128	36	30 - 51	116	39	31 - 53
Cerebrovascular Accidents	153	25	20 - 36	150	29	20 - 36
Gastrointestinal Catastrophes	31	48	23 - 61	39	33	23 - 57
Infectious Disease	49	39	28 - 58	40	52	24 - 58
Metabolic/Electrolyte Disorders	53	40	16 - 47	54	24	15 - 43
Pulmonary Disease	195	25	19 - 35	207	24	19 - 35
Renal Failure	11	36	16 - 77	22	32	17 - 71
Severe Acute Heart Disease	174	48	30 - 48	156	40	31 - 49
Severe Chronic Heart Disease	229	19	18 - 31	212	29	19 - 33
Severe Trauma	4	25	3 - 80	2	50	3 - 92
Gastrointestinal Disease	329	5	1 - 7	326	2	2 - 6
Gynecologic Disease	37	0	0 -100	38	0	0 -100
Low-Risk Heart Disease	469	3	2 - 6	435	3	2 - 6
Musculoskeletal/Skin Conditions	337	2	1 - 6	370	2	1 - 6
Neuropsychiatric/Sensory Disease	106	2	1 - 10	114	1	1 - 8
Urologic Disease	121	6	0 - 17	126	0	0 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 363
Occupancy Rate (%): 70
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 292
Percent of Physicians Who Are Board Certified Specialists: 81
Interns and Residents: 0
Registered Nurses: 271
Licensed Practical Nurses: 46

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

St. Clair Hospital
1000 Bower Hill Road Pittsburgh, Pennsylvania 15243 412-561-4900

October 11, 1988

Office of Research and Demonstrations
Health Care Financing Administration
Room 2-B-14 Oak Meadows Building
Attention: Mr. Timothy Green
6325 Security Boulevard
Baltimore, Maryland 21207

Re: Hospital ID # 390228

Dear Mr. Green:

Re the recent release of 1987 mortality data, please be advised that the following corrections need to be made with respect to hospital characteristics re St. Clair Memorial Hospital:

Beds	363
Total Number of Physicians	383
Percentage of physicians who are Board Certified Specialists	78%
Organ Transplant Services	No
Hospice Care	Yes

Please follow-up with respect to these corrections.

Sincerely yours,

Benjamin E. Snead
President

BES/ssl

Subsidiary, St. Clair Health Corporation • Partner, VHA of PA • Member, ALPHA Health Network

ST FRANCIS HOSPITAL OF NEW CASTLE

S MERCER AR PHILLIPS STREET
NEW CASTLE, PA 16101

Medicare Hospital Provider Number: 390017

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,109	13	9 - 14	1,171	12	9 - 14
Cancer	26	46	22 - 61	35	60	32 - 66
Cerebrovascular Accidents	33	30	15 - 47	30	27	14 - 47
Gastrointestinal Catastrophes	6	50	11 - 79	8	38	9 - 70
Infectious Disease	7	29	17 - 78	10	40	7 - 65
Metabolic/Electrolyte Disorders	18	33	14 - 59	17	6	5 - 40
Pulmonary Disease	63	35	12 - 38	54	26	14 - 40
Renal Failure	9	44	13 - 78	10	70	23 - 85
Severe Acute Heart Disease	54	37	27 - 54	50	30	28 - 54
Severe Chronic Heart Disease	53	23	11 - 35	62	21	14 - 36
Severe Trauma	1	100	0 - 98	1	0	1 - 97
Gastrointestinal Disease	100	4	0 - 13	98	4	1 - 13
Gynecologic Disease	16	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	186	4	1 - 8	203	3	1 - 8
Musculoskeletal/Skin Conditions	85	2	0 - 15	110	1	1 - 7
Neuropsychiatric/Sensory Disease	43	5	0 - 36	36	3	0 - 90
Urologic Disease	38	3	0 - 60	42	2	0 - 48

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	139
Occupancy Rate (%):	94
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST FRANCIS MEDICAL CNTR

45TH ST OFF PENN AVE
PITTSBURGH, PA 15201

Medicare Hospital Provider Number: 390029

Diagnostic Category	**Calender Year 1987**			**Calender Year 1986**		
	Cases	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**	**Cases**	**Actual Mortality Rate (%)**	**Range For Predicted Mortality (%)**
All Cases	3,062	11	9 - 13	3,180	12	10 - 14
Cancer	122	36	32 - 53	138	41	32 - 54
Cerebrovascular Accidents	92	27	18 - 37	100	22	18 - 36
Gastrointestinal Catastrophes	17	47	16 - 63	18	28	14 - 58
Infectious Disease	42	24	22 - 51	46	39	25 - 57
Metabolic/Electrolyte Disorders	48	19	10 - 39	45	20	13 - 42
Pulmonary Disease	120	27	16 - 35	143	29	19 - 37
Renal Failure	16	25	13 - 67	22	23	15 - 67
Severe Acute Heart Disease	109	45	25 - 46	120	41	29 - 49
Severe Chronic Heart Disease	159	21	17 - 32	166	27	19 - 34
Severe Trauma	6	17	6 - 70	4	0	4 - 72
Gastrointestinal Disease	140	4	1 - 10	158	4	1 - 9
Gynecologic Disease	28	0	0 -100	22	0	0 - 92
Low-Risk Heart Disease	580	5	2 - 6	506	5	2 - 6
Musculoskeletal/Skin Conditions	360	1	1 - 5	356	2	1 - 5
Neuropsychiatric/Sensory Disease	100	3	1 - 12	173	1	1 - 6
Urologic Disease	135	1	0 - 9	80	2	0 - 30

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 725
Occupancy Rate (%): 71
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 324
Percent of Physicians Who Are Board Certified Specialists: 61
Interns and Residents: 81
Registered Nurses: 694
Licensed Practical Nurses: 130

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

ST.
FRANCIS
HEALTH
SYSTEM

St. Francis Medical Center

SISTER M. ROSITA WELLINGER
Executive Vice President &
Chief Executive Officer

October 10, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Sandra Kappert

Dear Ms. Kappert:

In response to the Health Care Financing Administration Mortality Data Release, please be advised that the enclosed one-page statistical summary sheet has been revised to provide more consistant information.

Our preliminary analysis of the data indicates that the clinical data is reasonably accurate. However, the hospital characteristics data section was incorrectly based on 342 beds instead of 697 beds for that year. We have a bed capacity of 756 with 697 in operation. Therefore, we have given rations appropriately calculated based on total acute operational beds. The statistics would be as follows:

Survey and Year: AHA 1986
- Beds (#): 697
- Occupancy Rate (%): 73
- Ownership/Control: Private, Non-Profit

Staffing:
- Total Number of Physicians: 352
- Percent of Physicians who are Board Certified Specialists: 66
- Interns & Residents per Bed: 0.12
- Registered Nurses per Bed: 1.05
- Licensed Practical Nurses per Bed: 0.20

The above calculations were based on full-time plus one-half of part-time. If there are any questions, please contact my office.

Sincerely yours,

Sister M. Rosita

Sister M. Rosita Wellinger
Executive Vice President and
Chief Executive Officer

ST JOHNS HEALTH AND HOSPITAL CENTER

3339 MCCLURE AVE
PITTSBURGH, PA 15212

Medicare Hospital Provider Number: 390034

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	422	10	7 - 14	492	10	7 - 14
Cancer	12	50	25 - 77	8	38	14 - 74
Cerebrovascular Accidents	13	31	8 - 57	14	29	11 - 57
Gastrointestinal Catastrophes	2	100	3 - 88	5	20	5 - 74
Infectious Disease	5	40	4 - 77	8	38	10 - 71
Metabolic/Electrolyte Disorders	5	40	2 - 80	7	14	1 - 70
Pulmonary Disease	23	39	6 - 47	22	18	11 - 46
Renal Failure	2	50	7 - 96	1	100	2 - 98
Severe Acute Heart Disease	11	45	16 - 70	16	44	16 - 62
Severe Chronic Heart Disease	13	15	9 - 52	21	19	8 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	28	11	0 - 69	29	0	0 - 25
Gynecologic Disease	7	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	36	3	0 - 30	42	0	1 - 13
Musculoskeletal/Skin Conditions	38	0	0 - 19	50	0	0 - 14
Neuropsychiatric/Sensory Disease	66	0	0 - 13	76	3	0 - 17
Urologic Disease	6	0	0 -100	17	0	0 - 90

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	247
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	41
Percent of Physicians Who Are Board Certified Specialists:	22
Interns and Residents:	0
Registered Nurses:	102
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

3339 McClure Avenue
Pittsburgh, PA 15212

**St. John's Health and
Hospital Center, Inc.**

Medicare Provider #390034

October 21, 1988

Health Standards and Quality Bureau
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Hospital Specific Mortality Data

The following is offered as comments to the mortality data prepared by the Health Care Financing Administration for St. John's Health and Hospital Center, Pittsburgh, Pennsylvania.

Though we have noted much improvement in the information presented by HCFA in this year's mortality data, we again have identified a patient who was readmitted after the admission date noted in the report.

In this year's data we see an increase in the number of patients admitted from skilled nursing facilities and an increase in the number of cancer related deaths. Of the 44 patients who expired following admission to our facility, 30% of the patients were over the age of 85 with half of those patients in their nineties. Though age itself, like the mortality data, does not give a true picture of the situation, each case was again reviewed. We found complicating medical conditions existed which adversely affected the patient's potential outcome. Of those patients who expired following discharge, on retrospective review, we found discharge screens were met in all cases.

Age, as well as a patient's complicating medical condition, in addition to the cause for admission to an acute care facility, must be considered when reviewing this data. St. John's Health and Hospital Center appreciated the opportunity to comment on the statistics prepared by HCFA.

Sincerely,

Harold D Sanders

Harold D. Sanders
President

ST JOSEPH HOSP

250 COLLEGE AVE
LANCASTER, PA 17604

Medicare Hospital Provider Number: 390061

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,430	12	9 - 14	2,511	11	9 - 14
Cancer	69	51	25 - 52	93	48	30 - 55
Cerebrovascular Accidents	96	26	17 - 36	92	29	19 - 39
Gastrointestinal Catastrophes	25	36	17 - 57	23	39	15 - 57
Infectious Disease	38	29	20 - 52	28	46	18 - 57
Metabolic/Electrolyte Disorders	26	42	12 - 52	20	10	8 - 43
Pulmonary Disease	107	22	15 - 34	108	22	16 - 35
Renal Failure	9	44	14 - 79	12	50	15 - 76
Severe Acute Heart Disease	105	41	30 - 51	106	38	30 - 51
Severe Chronic Heart Disease	149	28	16 - 32	129	20	15 - 31
Severe Trauma	3	33	1 - 89	5	40	2 - 79
Gastrointestinal Disease	140	6	1 - 12	167	4	1 - 9
Gynecologic Disease	34	3	0 -100	28	0	0 -100
Low-Risk Heart Disease	294	3	1 - 6	276	3	1 - 6
Musculoskeletal/Skin Conditions	235	3	0 - 7	281	2	0 - 6
Neuropsychiatric/Sensory Disease	56	2	1 - 14	66	5	0 - 27
Urologic Disease	147	1	0 - 7	110	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	309
Occupancy Rate (%):	71
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	160
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	302
Licensed Practical Nurses:	44

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPH HOSP

100 LINCOLN AVENUE
CARBONDALE, PA 18407

Medicare Hospital Provider Number: 390095

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	790	15	10 - 16	848	12	9 - 15
Cancer	20	60	31 - 73	22	55	30 - 71
Cerebrovascular Accidents	32	47	11 - 46	24	33	13 - 51
Gastrointestinal Catastrophes	7	14	13 - 70	16	25	18 - 62
Infectious Disease	16	38	12 - 59	21	14	16 - 51
Metabolic/Electrolyte Disorders	18	33	6 - 53	19	42	8 - 54
Pulmonary Disease	52	29	15 - 41	35	23	13 - 43
Renal Failure	3	67	4 - 87	6	33	9 - 80
Severe Acute Heart Disease	35	51	20 - 53	27	33	21 - 56
Severe Chronic Heart Disease	56	18	12 - 34	47	21	12 - 37
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	46	2	0 - 23	62	5	1 - 18
Gynecologic Disease	5	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	89	6	1 - 14	112	6	1 - 14
Musculoskeletal/Skin Conditions	85	0	1 - 7	113	3	0 - 10
Neuropsychiatric/Sensory Disease	27	7	0 - 41	39	3	0 - 28
Urologic Disease	32	0	0 - 25	22	0	0 - 81

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	102
Occupancy Rate (%):	65
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	46
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	82
Licensed Practical Nurses:	30

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SAINT
JOSEPH'S
HOSPITAL

100 Lincoln Avenue
Carbondale, Pennsylvania 18407
(717) 282-2100

HOSPITAL ID 390095

COMMENTS ON 1987 MEDICARE MORTALITY INFORMATION

SAINT JOSEPH'S HOSPITAL
CARBONDALE, PA

According to the information submitted on the AHA 1986 Survey, St. Joseph's Hospital, Carbondale, PA 18407 has 119 beds not 66 beds.

In 1987, at St. Joseph's Hospital, one hundred seventeen Medicare patients died within thirty days of admission. That number represents 15% of all Medicare admissions and 3.7% of the total admissions, which is within the HCFA predicted range. Twelve of the patients died after discharge from the hospital but are counted in the actual mortality rate. Whether their deaths were in any way related to the reason for admission to the hospital would only be speculation. In 1987, St. Joseph's had fewer Medicare patients admitted than in 1986. Those who were admitted and died were sicker on admission, had a multiplicity of serious diagnoses and on the average were seventy-eight years of age.

All actual mortality rates for St. Joseph's are within the range for predicted mortality except the category of cerebrovascular accidents or strokes which is one percentage higher than the range. In studying the records of the fifteen patients who died as a result of a stroke, it was apparent that due to the severity of illness, (which was not factored into any of the raw data), caused by the stroke, that these patients were expected to die. Also, at least two or more of the patients were transferred to St. Joseph's from another facility because death was imminent and the family requested that the patient be at St. Joseph's.

Prior to receiving the 1987 Medicare Mortality Information the charts of every Medicare patient who died in the hospital had already been reviewed as one part of the monthly Quality Assurance activities. One committee of the Medical Staff is designated to perform mortality review and ascertain whether or not death was an expected outcome and whether or not treatment and management was appropriate. Therefore, each record had been reviewed in depth and discussed through the internal hospital peer review process. Also, many of the charts went through the process of external peer review by KePRO, the HCFA contracted agency for Medicare peer review. Mortality reviews have already been incorporated into internal and external peer review as mechanisms for any problem identification and resolution.

St. Joseph's reiterates HCFA's point that the mortality information by itself is not a complete measure of the quality of care at an individual hospital. The relationship between mortality and hospital performance has not been validated. Better, more comprehensive measures are needed to assess performance.

ST JOSEPHS HOSP

16TH ST GIRARD AVENUE
PHILADELPHIA, PA 19130

Medicare Hospital Provider Number: 390077

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	958	16	11 - 16	976	15	10 - 15
Cancer	21	29	21 - 60	21	62	18 - 59
Cerebrovascular Accidents	67	21	17 - 38	75	17	16 - 35
Gastrointestinal Catastrophes	5	60	9 - 80	4	75	3 - 80
Infectious Disease	28	54	20 - 58	20	60	21 - 65
Metabolic/Electrolyte Disorders	49	31	11 - 42	47	28	12 - 43
Pulmonary Disease	60	33	14 - 40	40	38	15 - 46
Renal Failure	7	0	13 - 68	4	25	6 - 83
Severe Acute Heart Disease	42	33	21 - 51	33	36	20 - 53
Severe Chronic Heart Disease	85	19	12 - 31	68	15	12 - 30
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	43	5	0 - 26	60	2	0 - 14
Gynecologic Disease	10	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	99	0	1 - 6	139	4	1 - 9
Musculoskeletal/Skin Conditions	91	2	0 - 15	99	1	0 - 16
Neuropsychiatric/Sensory Disease	12	0	0 - 88	12	8	0 -100
Urologic Disease	23	4	0 - 98	25	4	0 - 91

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	178
Occupancy Rate (%):	81
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	212
Percent of Physicians Who Are Board Certified Specialists:	47
Interns and Residents:	12
Registered Nurses:	133
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

OFFICE OF ADMINISTRATOR
16TH AND GIRARD AVENUE

St. Joseph's Hospital

PHILADELPHIA, PA. 19130

Provider Number: 390077
October 21, 1988

Ms. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Ms. Kappert:

This year, as last year, St. Joseph's Hospital appreciates the opportunity of participating in the release of hospital mortality information. We would like to provide some comments concerning St. Joseph's Hospital itself as well as comments concerning an internal review of the statistics which will be published.

St. Joseph's Hospital is a 178-bed acute care hospital located in an economically depressed area of North Philadelphia. The hospital is a community hospital and three-quarters of its Medicare population comes from the three zip codes surrounding the hospital. The population served by the hospital is generally very poor and suffers a high unemployment rate. Forty percent of the community the hospital serves is below the poverty line.

As a result of the hospital being located in such an economically depressed area, many of the patients who are residents of this area have a multiplicity of medical problems. They frequently are unable to seek medical help on a continuous basis and many of the very elderly come to the hospital when they are in the end stages of their chronic illnesses. One of the significant results of an internal review of the cases involved in the 1987 mortality information release is that 60% of the patients who expired had a multiplicity of medical problems; these patients had at least four comorbid, complicating conditions, in addition to the problem for which they were admitted and many of these patients had up to eight or more comorbid, complicating conditions.

The mortality rate for the Medicare patients at St. Joseph's Hospital was 16%. Of the 16 diagnostic categories included in the mortality statistics, the hospital fell within the range of predicted mortality in all 16 categories. A review of the cases involved in the mortality statistics release revealed some very significant findings. 23.2% percent of the Medicare patients who expired during 1987 were 85 years of age and older. 25.6% were between the ages of 80 and 84. 21.2% were between the ages of 75 and 79. These figures reveal that a very considerable number of the Medicare patients who expired were quite elderly and the death rate of this group of patients is higher than the norm by nature. Another statistic of importance is that 88.7% of the patients who expired were admitted through the Emergency Room. This is a very high percentage of patients and this indicates that these patients were already in a condition necessitating admission on an emergency basis. The overwhelming majority of patients were not elective, scheduled admissions, but had to be admitted on an emergency basis, and many of these patients were never seen at the hospital before. 79.5% of the patients were admitted to the hospital via ambulance or fire rescue squad. This was another indication of the seriousness of many of the patients' conditions--most of the patients were not ambulatory, but, rather had to be brought to the hospital in an ambulance. Another factor of significance was the fact that a high percentage of patients, 35.8%, were nursing home patients. These patients were often gravely ill upon admission to the hospital and suffered from a multiplicity of problems in addition to the problem for which they were admitted. It is also interesting to note that 31.7% of the patients who expired had family members who requested that no extraordinary measures be taken to prolong their family members' lives.

The mortality rate of the Medicare patients who expired at St. Joseph's Hospital is slightly higher than the rate in 1986 and this may possibly be due to the higher number of nursing home patients who were admitted in 1987. The complexity and multiplicity of many of the patients' medical problems, the advanced age of the patients, the high percentage of patients who were admitted from the Emergency Room, the high percentage of patients who were transferred to the hospital via ambulance or fire rescue squad, and the comparatively large number of patients who were transferred to the hospital from nursing homes all were of significance with respect to the mortality rate of the Medicare patients. While no rate of mortality is insignificant, particularly to the family and friends behind the statistics, the death rate must be understood in light of the demographic characteristics and severity mix of the patients served by St. Joseph's Hospital.

The Governing Board, Medical Staff and Management of St. Joseph's Hospital are committed to ensuring the highest quality of care for the medical needs of the community of North Philadelphia. As part of its commitment to quality, the medical staff reviews, at major medical staff meetings throughout the year, the medical records of all patients who expire in St. Joseph's Hospital. Caution must be exercised when using mortality statistics as a measure of the quality of care that was rendered because mortality statistics cannot necessarily always be used as a measure of quality, especially when all factors involving the general setting of the hospital, as well as the severity of its patients' medical problems, are not taken into account. St. Joseph's Hospital has an ongoing quality review program designed to help the hospital look at its problem areas as well as to initiate follow-up. St. Joseph's Hospital has always strived to provide the highest quality of care to its patients and this goal will remain as the hospital's most important one.

Sincerely,

Sister Mary Anita

Sister Mary Anita
Administrator

ST JOSEPHS HOSP

215 N 12TH ST
READING, PA 19603

Medicare Hospital Provider Number: 390158

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,136	13	10 - 15	2,349	13	10 - 14
Cancer	113	50	30 - 53	113	50	31 - 54
Cerebrovascular Accidents	94	29	18 - 37	94	36	18 - 39
Gastrointestinal Catastrophes	24	33	20 - 60	33	27	18 - 52
Infectious Disease	19	42	13 - 57	22	50	18 - 61
Metabolic/Electrolyte Disorders	43	14	15 - 43	58	31	11 - 41
Pulmonary Disease	79	28	16 - 38	89	27	15 - 36
Renal Failure	10	50	12 - 76	11	45	8 - 72
Severe Acute Heart Disease	87	31	29 - 51	86	49	28 - 51
Severe Chronic Heart Disease	112	26	17 - 34	123	24	16 - 33
Severe Trauma	2	0	1 - 90	4	25	5 - 80
Gastrointestinal Disease	203	1	1 - 6	198	5	1 - 9
Gynecologic Disease	9	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	233	4	1 - 8	266	3	2 - 7
Musculoskeletal/Skin Conditions	265	1	1 - 5	257	1	1 - 5
Neuropsychiatric/Sensory Disease	54	7	0 - 28	71	0	0 - 10
Urologic Disease	93	1	0 - 11	105	0	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	289
Occupancy Rate (%):	56
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	155
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	12
Registered Nurses:	260
Licensed Practical Nurses:	68

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SAINT
JOSEPH
HOSPITAL

Twelfth and Walnut Streets, Box 316, Reading, Pennsylvania 19603 Tel. (215) 378-2000

September 27, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Washington, DC 20201

Dear Dr. Roper:

I write to correct errors in the data provided to this hospital in the 1987 Medicare Hospital Mortality Information.

Under Hospital Characteristics, AHA 1986, our number of beds that year was 289 (not 208), and the percent of physicians who are board certified specialists was 75.6% (not 51%).

The correct number for 1987, which your administration intends to publish later this year, are 289 beds and 79.3 percent board certified physician specialists. We did provide hospice care in the year 1987.

We trust that the correct information will appear in the material to be released to the public in December.

Sincerely yours,

Alex Whan

Alex Whan
Chief Operating Officer

AW:mcG

ST LUKES HOSPITAL OF BETHLEHEM

801 OSTRUM ST
BETHLEHEM, PA 18015

Medicare Hospital Provider Number: 390049

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,486	11	10 - 14	3,528	12	11 - 15
Cancer	127	43	30 - 52	185	43	33 - 53
Cerebrovascular Accidents	118	28	20 - 38	137	26	19 - 36
Gastrointestinal Catastrophes	26	23	21 - 58	41	20	19 - 49
Infectious Disease	43	42	23 - 55	40	27	24 - 56
Metabolic/Electrolyte Disorders	50	24	12 - 41	49	22	11 - 41
Pulmonary Disease	137	26	16 - 34	117	26	16 - 36
Renal Failure	15	27	13 - 69	15	47	18 - 77
Severe Acute Heart Disease	150	35	29 - 48	140	35	29 - 48
Severe Chronic Heart Disease	215	20	16 - 29	173	20	16 - 30
Severe Trauma	7	29	8 - 71	5	40	10 - 81
Gastrointestinal Disease	229	4	1 - 8	243	4	2 - 8
Gynecologic Disease	48	0	0 - 82	34	0	0 - 69
Low-Risk Heart Disease	540	4	2 - 6	536	5	2 - 6
Musculoskeletal/Skin Conditions	298	5	2 - 8	296	3	1 - 6
Neuropsychiatric/Sensory Disease	104	1	1 - 8	102	3	1 - 11
Urologic Disease	144	3	0 - 12	160	1	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	425
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	244
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	28
Registered Nurses:	408
Licensed Practical Nurses:	64

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

St. Luke's
HOSPITAL of Bethlehem, Pennsylvania 18015

October 24, 1988

Health Standards Quality Bureau - HCFA
Attn: Mrs. Sandra Kappert
2D2 Meadows E. Bldg.
6325 Security Blvd.
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Thank you for the opportunity to provide comment on the mortality information which the Health Care Finance Administration (HCFA) plans to release in December 1988.

St. Luke's Hospital has a comprehensive, ongoing, hospital-wide quality assurance program to monitor and evaluate the quality and appropriateness of patient care services we provide. Mortality review is one aspect of that process.

The data that will be released in December 1988, which covers calendar year 1987, has been reviewed by our quality assurance professionals. It fell well within the predicted mortality ranges with very little basic change from the previous year's data for calendar year 1986. We continue to believe that the mortality statistics should not be the sole measure of quality of care.

The most crucial point to understand in reviewing these data are the facts that the severity of illness, condition on admission, age, and the overall health of the patient prior to admission to the hospital, cannot be accounted for without reviewing the medical record of each individual patient.

Since the diagnosis related group (DRG) is primarily calculated based upon the principal diagnosis (i.e. that diagnosis, which after study, occasioned the admission to the hospital) other significant diagnoses and procedures are not adequately reflected in the DRG. Thus, it is very difficult, if not impossible, to draw any conclusions about the comparative length of stay or death percentage data. Some hospitals serve as regional centers for particular areas of expertise. The types of services which a hospital provides and its reputation in a particular region, can affect the types of patients who are admitted to the hospital.

Recent legislative changes in this state, as well as the hospital's ongoing commitment to providing quality of care to our citizens, have resulted in the fact that hospitals are installing severity indexing systems to assist in internally monitoring quality of care. We look forward to the usefulness of those data as feedback on our own performance that may allow comparable, verifiable data for hospitals.

Once again, our thanks for the opportunity to comment on the upcoming release of data. We urge that these comments be considered regarding the validity of the information being released to the general public.

Cordially,

Brent Batman
Vice President

ST MARGARET MEM HOSP

815 FREEPORT ROAD
PITTSBURGH, PA 15215

Medicare Hospital Provider Number: 390102

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,692	11	10 - 14	2,601	9	9 - 13
Cancer	98	40	30 - 53	88	43	30 - 54
Cerebrovascular Accidents	98	21	17 - 35	90	20	17 - 36
Gastrointestinal Catastrophes	21	29	13 - 55	19	47	13 - 59
Infectious Disease	34	47	20 - 56	26	46	18 - 58
Metabolic/Electrolyte Disorders	28	43	14 - 53	25	36	17 - 57
Pulmonary Disease	99	27	19 - 39	75	17	15 - 35
Renal Failure	11	36	19 - 79	7	29	8 - 76
Severe Acute Heart Disease	111	35	29 - 49	123	35	30 - 49
Severe Chronic Heart Disease	154	21	16 - 31	144	17	18 - 32
Severe Trauma	6	33	3 - 74	4	25	3 - 80
Gastrointestinal Disease	175	3	1 - 8	151	1	1 - 7
Gynecologic Disease	14	0	0 -100	25	0	0 -100
Low-Risk Heart Disease	291	7	2 - 8	279	2	2 - 6
Musculoskeletal/Skin Conditions	567	1	1 - 4	521	1	1 - 4
Neuropsychiatric/Sensory Disease	88	0	1 - 7	97	5	1 - 14
Urologic Disease	74	0	0 - 9	67	1	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	267
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	239
Percent of Physicians Who Are Board Certified Specialists:	96
Interns and Residents:	30
Registered Nurses:	189
Licensed Practical Nurses:	34

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

**SAINT
MARGARET
MEMORIAL
HOSPITAL**

815 Freeport Road
Pittsburgh, PA 15215
(412) 784-4000

**Office of the
President**

October 20, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human
Services
Washington, D.C. 20201

RE: Mortality Information
Hospital ID: 390102

Dear Dr. Roper:

Thank you for the opportunity to respond to the mortality data prepared by HCFA relative to St. Margaret Memorial Hospital. Our review of the data revealed no significant errors, although we were unable to confirm all deaths indicated as occurring after discharge from the hospital.

The stated 1986 hospital characteristics are inaccurate in several areas. St. Margaret Memorial Hospital is a 267-bed, private, non-profit facility. For the indicated time period, occupancy was in fact 75%. There were 225 physicians with Active or Assistant Staff appointments to the medical staff, 75% of whom were Board Certified. The stated ratios of residents and nurses per bed are based on a demoninator of 180 rather than 267.

St. Margaret does provide emergency/trauma care and does have a coronary care unit. We do not offer organ transplant services, although organ harvesting is done here. We do not provide hospice care.

Yours truly,

Stanley J. Kevish

Stanley J. Kevish
President

SJK/dk

ST MARY HOSP

FRANKFORD AVE PLAMER ST
PHILADELPHIA, PA 19125

Medicare Hospital Provider Number: 390023

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	877	10	9 - 15	835	12	9 - 15
Cancer	17	59	19 - 64	20	40	22 - 65
Cerebrovascular Accidents	44	11	15 - 36	32	25	14 - 45
Gastrointestinal Catastrophes	15	47	13 - 63	11	36	9 - 64
Infectious Disease	6	67	12 - 78	7	29	14 - 75
Metabolic/Electrolyte Disorders	20	10	10 - 44	24	25	10 - 48
Pulmonary Disease	64	8	16 - 33	57	19	15 - 38
Renal Failure	5	40	4 - 80	3	100	11 - 87
Severe Acute Heart Disease	36	53	21 - 54	33	42	22 - 56
Severe Chronic Heart Disease	56	20	12 - 35	52	17	12 - 35
Severe Trauma	0	-	-	1	0	0 -100
Gastrointestinal Disease	61	2	0 - 14	56	2	1 - 13
Gynecologic Disease	11	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	133	2	1 - 7	128	4	1 - 10
Musculoskeletal/Skin Conditions	81	1	1 - 10	69	1	0 - 13
Neuropsychiatric/Sensory Disease	20	0	0 - 86	6	0	0 -100
Urologic Disease	39	0	0 - 43	41	2	0 - 76

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 160
Occupancy Rate (%): 75
Ownership/Control: Church

STAFFING

Total Number of Physicians: 167
Percent of Physicians Who Are Board Certified Specialists: 62
Interns and Residents: 3
Registered Nurses: 143
Licensed Practical Nurses: 34

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

ST MARY S HOSPITAL INC

LANGHORNE-NEWTOWN RD
LANGHORNE, PA 19047

Medicare Hospital Provider Number: 390258

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,768	16	11 - 15	1,696	14	11 - 16
Cancer	40	47	27 - 60	44	39	29 - 60
Cerebrovascular Accidents	90	26	20 - 39	94	21	20 - 39
Gastrointestinal Catastrophes	11	45	15 - 70	16	44	11 - 60
Infectious Disease	25	28	19 - 56	37	27	19 - 51
Metabolic/Electrolyte Disorders	19	32	8 - 53	24	33	13 - 53
Pulmonary Disease	118	34	17 - 37	94	21	17 - 37
Renal Failure	14	50	14 - 73	11	45	17 - 79
Severe Acute Heart Disease	66	42	27 - 53	74	51	27 - 52
Severe Chronic Heart Disease	99	32	15 - 35	105	27	17 - 36
Severe Trauma	1	0	0 -100	2	50	1 - 93
Gastrointestinal Disease	135	5	1 - 11	125	5	1 - 11
Gynecologic Disease	13	0	0 -100	24	0	0 -100
Low-Risk Heart Disease	244	4	2 - 7	193	1	2 - 6
Musculoskeletal/Skin Conditions	148	4	0 - 11	148	2	1 - 8
Neuropsychiatric/Sensory Disease	45	2	0 - 22	46	0	0 - 15
Urologic Disease	58	2	0 - 23	81	2	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 251
Occupancy Rate (%): 73
Ownership/Control: Church

STAFFING

Total Number of Physicians: 286
Percent of Physicians Who Are Board Certified Specialists: 66
Interns and Residents: 0
Registered Nurses: 265
Licensed Practical Nurses: 49

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

SAINT MARY HOSPITAL

LANGHORNE-NEWTOWN ROAD
LANGHORNE, PENNSYLVANIA 19047

(215) 750-2000

October 20, 1988 Medicare I.D. #390258

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Medicare Mortality Information

Gentlemen:

In reviewing the information on Mortality of Medicare patients admitted to our hospital, we found the following errors in the hospital characteristics:

1. The number of beds should be 251 not 191.
2. The occupancy rate should be 73% not 69%.
3. The total number of physicians should be 294 not 275.
4. The percent of physicians board certified should be 71% not 55%.
5. The registered nurses per bed should be 0.86 not 1.46.
6. We do have a coronary care unit.
7. We do not have an organ transplant service.

In reviewing the statistics, the actual mortality rate is well within the predicted range for all the individual listed categories. It is noted that the individual listed categories account for 63% of the "ALL CAUSES" category. In reviewing the "other" causes (which accounts for the remaining 37% of the "ALL CAUSE" category), there is a 13% actual mortality rate within the 30 day period from discharge date. In view of the above facts, it is difficult to have confidence in the appropriateness of the 11% to 15% predicted range of mortality for all causes.

All mortalities are reviewed under our Quality Assurance Program. In 1987 there were a total of 244 in-hospital deaths which is a 13% rate of significance 36.8% of the medicare mortalities were patients transferred from Extended Care Facilities. There were "No Code" orders on 56.9% of medicare mortalities. While HCFA attempted to include some measures of severity in their predictions, I don't believe it reflected accurately the multiple problems of these type of patients.

Sincerely,

Sister Clare

Sister Clare Carty, OSF
President

SUBURBAN GENERAL HOSP

S JACKSON AVE
PITTSBURGH, PA 15212

Medicare Hospital Provider Number: 390074

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,966	11	11 - 15	2,041	11	9 - 14
Cancer	65	35	30 - 56	53	38	26 - 55
Cerebrovascular Accidents	91	25	18 - 37	94	29	20 - 40
Gastrointestinal Catastrophes	21	43	19 - 62	20	20	19 - 58
Infectious Disease	28	36	16 - 54	16	25	19 - 63
Metabolic/Electrolyte Disorders	19	26	13 - 56	19	21	6 - 48
Pulmonary Disease	87	17	16 - 35	63	29	14 - 39
Renal Failure	11	27	19 - 79	5	60	10 - 85
Severe Acute Heart Disease	96	34	30 - 51	86	42	29 - 52
Severe Chronic Heart Disease	117	23	16 - 33	99	23	16 - 34
Severe Trauma	4	25	6 - 81	3	33	5 - 87
Gastrointestinal Disease	135	1	1 - 7	159	3	1 - 8
Gynecologic Disease	10	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	247	2	2 - 6	260	4	2 - 8
Musculoskeletal/Skin Conditions	242	2	1 - 7	245	2	1 - 6
Neuropsychiatric/Sensory Disease	69	3	0 - 16	86	5	0 - 16
Urologic Disease	60	2	0 - 24	70	1	0 - 26

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 176
Occupancy Rate (%): 69
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 109
Percent of Physicians Who Are Board Certified Specialists: 71
Interns and Residents: 0
Registered Nurses: 157
Licensed Practical Nurses: 20

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

SUBURBAN GNRL HOSP

2701 DEKALB PIKE
NORRISTOWN, PA 19401

Medicare Hospital Provider Number: 390116

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	945	14	9 - 15	948	13	9 - 15
Cancer	22	55	23 - 64	27	41	28 - 66
Cerebrovascular Accidents	29	34	13 - 48	21	24	14 - 51
Gastrointestinal Catastrophes	14	57	20 - 70	4	75	14 - 88
Infectious Disease	9	44	11 - 70	9	44	13 - 72
Metabolic/Electrolyte Disorders	33	33	9 - 45	21	24	7 - 48
Pulmonary Disease	45	36	13 - 43	34	24	12 - 42
Renal Failure	4	25	10 - 87	4	50	11 - 89
Severe Acute Heart Disease	32	50	22 - 57	35	49	23 - 56
Severe Chronic Heart Disease	52	13	14 - 34	58	12	14 - 33
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	70	6	1 - 18	76	4	1 - 14
Gynecologic Disease	8	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	139	4	1 - 10	142	5	2 - 10
Musculoskeletal/Skin Conditions	84	1	1 - 10	88	2	0 - 12
Neuropsychiatric/Sensory Disease	14	0	0 - 48	26	4	0 - 59
Urologic Disease	53	2	0 - 40	39	3	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	132
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	200
Percent of Physicians Who Are Board Certified Specialists:	45
Interns and Residents:	32
Registered Nurses:	126
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SUNBURY COMMUNITY HOSP

350 N 11TH ST
SUNBURY, PA 17801

Medicare Hospital Provider Number: 390084

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,030	10	9 - 14	1,090	13	9 - 15
Cancer	18	33	23 - 66	11	73	28 - 79
Cerebrovascular Accidents	32	34	14 - 47	38	34	16 - 47
Gastrointestinal Catastrophes	7	29	4 - 70	7	14	7 - 65
Infectious Disease	11	27	14 - 65	7	43	14 - 78
Metabolic/Electrolyte Disorders	12	33	7 - 60	25	28	11 - 50
Pulmonary Disease	41	24	11 - 39	47	43	16 - 46
Renal Failure	5	40	10 - 84	5	40	12 - 87
Severe Acute Heart Disease	53	32	29 - 55	50	34	28 - 55
Severe Chronic Heart Disease	46	17	14 - 37	52	37	16 - 42
Severe Trauma	3	33	4 - 86	2	0	4 - 89
Gastrointestinal Disease	73	1	1 - 11	92	4	1 - 13
Gynecologic Disease	7	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	186	3	1 - 8	193	5	2 - 9
Musculoskeletal/Skin Conditions	127	2	1 - 9	134	4	1 - 11
Neuropsychiatric/Sensory Disease	21	0	0 - 54	34	6	0 - 47
Urologic Disease	43	5	0 - 42	48	0	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 167
Occupancy Rate (%): 61
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 41
Percent of Physicians Who Are Board Certified Specialists: 56
Interns and Residents: 0
Registered Nurses: 97
Licensed Practical Nurses: 61

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

SUNBURY
COMMUNITY
HOSPITAL

350 N. ELEVENTH STREET • PO BOX 737 • SUNBURY, PA 17801 • (717) 286-3333

October 21, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Sandra Kappert

Gentlemen:

We have received the Medicare Hospital Mortality Information provided to us by the Department of Health and Human Services on September 15, 1988. The review of the Hospital Characteristics indicated that we have no Coronary Care Unit. A correction is needed since we do have an Intensive Coronary Care Unit.

We understand that you will be using the information taken from the 1987 AHA Survey, published in the 1988 AHA Guide. We trust that since you will be using this information, the remainder of our Hospital Characteristics will not be omitted as in the copy you furnished to us with the above mailing.

Sincerely,

Lucille E. Michael

Lucille E. Michael
Quality Assurance Coordinator

TAYLOR HOSP

EAST CHESTER PIKE
RIDLEY PARK, PA 19078

Medicare Hospital Provider Number: 390167

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,748	12	10 - 14	1,799	12	10 - 15
Cancer	74	41	28 - 54	66	36	26 - 53
Cerebrovascular Accidents	66	29	17 - 40	79	23	16 - 37
Gastrointestinal Catastrophes	18	28	16 - 60	6	33	9 - 76
Infectious Disease	14	36	15 - 64	20	15	22 - 58
Metabolic/Electrolyte Disorders	36	31	14 - 48	45	22	12 - 42
Pulmonary Disease	89	34	19 - 42	81	32	19 - 42
Renal Failure	2	0	2 - 89	6	33	16 - 86
Severe Acute Heart Disease	53	51	23 - 51	65	48	26 - 52
Severe Chronic Heart Disease	87	25	15 - 34	104	26	16 - 34
Severe Trauma	1	0	0 - 98	2	0	1 - 90
Gastrointestinal Disease	142	1	2 - 8	163	2	1 - 8
Gynecologic Disease	18	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	231	2	1 - 6	242	2	2 - 6
Musculoskeletal/Skin Conditions	164	1	1 - 6	152	3	1 - 8
Neuropsychiatric/Sensory Disease	39	5	0 - 29	31	0	0 - 23
Urologic Disease	83	2	0 - 20	81	5	0 - 33

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	203
Occupancy Rate (%):	66
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	121
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	93
Licensed Practical Nurses:	44

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

TAYLOR HOSPITAL
A Tradition of Caring
RIDLEY PARK, PENNSYLVANIA 19078-2286
215 / 595 • 6000

October 21, 1988 RE: Provider #390167

William L. Roper, M.D., Administrator
Health Care Finance Administration
c/o Health Standards and Quality Bureau
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Dr. Roper:

In response to your letter of September 15, 1988, we reviewed the mortality information you provided on Medicare patients discharged from Taylor Hospital in 1987.

Our mortality rate fell within the predicted range in all 16 diagnostic categories. The Severe Acute Heart Disease category was on the high side within the predicted range. We noted that the patients in this group presented either in advanced states of their disease processes or severely acute conditions with multiple co-morbidities at the time of admission.

Several items in your data on our hospital characteristics need the following correction: we have 203 beds with a distinct Coronary Care Unit and a Hospice Program providing home care for discharged terminally ill patients.

Please feel free to contact us if you require further information. Thank you for the opportunity to provide this comment.

Sincerely,

Wm. Michael Tomlinson
President and
Chief Operating Officer

WMT/jmw

TEMPLE UNIVERSITY HOSP

3401 N BROAD ST
PHILADELPHIA, PA 19140

Medicare Hospital Provider Number: 390027

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,075	11	10 - 14	2,083	11	10 - 14
Cancer	103	29	27 - 49	86	28	29 - 52
Cerebrovascular Accidents	66	11	16 - 34	93	24	18 - 37
Gastrointestinal Catastrophes	12	25	12 - 62	22	18	13 - 50
Infectious Disease	21	62	21 - 63	24	71	27 - 66
Metabolic/Electrolyte Disorders	60	32	18 - 48	47	26	16 - 46
Pulmonary Disease	62	26	14 - 39	75	28	11 - 35
Renal Failure	8	25	16 - 79	11	36	10 - 72
Severe Acute Heart Disease	80	25	27 - 48	58	31	25 - 50
Severe Chronic Heart Disease	126	21	15 - 31	109	17	15 - 31
Severe Trauma	8	38	5 - 69	5	20	5 - 75
Gastrointestinal Disease	101	2	1 - 10	107	4	1 - 12
Gynecologic Disease	5	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	324	6	2 - 8	245	4	2 - 8
Musculoskeletal/Skin Conditions	192	1	1 - 5	192	2	1 - 7
Neuropsychiatric/Sensory Disease	105	1	1 - 8	101	3	1 - 11
Urologic Disease	52	0	0 - 18	57	0	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	407
Occupancy Rate (%):	87
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	461
Percent of Physicians Who Are Board Certified Specialists:	84
Interns and Residents:	193
Registered Nurses:	469
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

TEMPLE UNIVERSITY
A Commonwealth University
Temple University Hospital
Philadelphia, Pennsylvania 19140
(215) 221-3024
Executive Director & CEO

October 20, 1988

Health Standards & Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Attention: Sandra Kappert

RE: Medicare Hospital Mortality Information (1987)
Provider Number: 390027

Dear Ms. Kappert:

We are of course pleased that your most recent data reaffirm the high quality of care provided at Temple University Hospital. We appreciate the opportunity to review this Medicare sample prior to national publication. Our analysis indicates that, while the two sets of data do not match exactly, the mortality information compiled by HCFA is consistent with records maintained by Temple University Hospital.

Our University Hospital's Board of Governors and our medical staff are strongly committed to excellence and quality of care. Temple University Hospital has a quality assurance program in place to identify and resolve problems. It is a multi-disciplinary program which monitors infection rates, utilization of antibiotics, unexpected returns to surgery, discharge planning and other issues that may impact upon the quality of health care services. We feel these monitors provide more meaningful assurance of quality health care than sole comparison of unadjusted mortality rates.

Again, thank you for the opportunity to comment on your Medicare data. If you or anyone receiving this information would like further information, please do not hesitate to call.

Sincerely,

Michael K. Jhin
Executive Director and
Chief Executive Officer

MKJ/dk

THE GETTYSBURG HOSPITAL

147 GETTYS ST
GETTYSBURG, PA 17325

Medicare Hospital Provider Number: 390065

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,037	12	11 - 16	1,086	13	10 - 15
Cancer	29	52	23 - 60	32	50	28 - 64
Cerebrovascular Accidents	52	25	16 - 41	55	27	18 - 42
Gastrointestinal Catastrophes	9	44	12 - 71	6	83	9 - 71
Infectious Disease	14	7	14 - 51	9	22	10 - 65
Metabolic/Electrolyte Disorders	15	13	13 - 54	12	17	5 - 54
Pulmonary Disease	55	16	16 - 38	56	27	16 - 41
Renal Failure	10	40	11 - 74	6	17	11 - 78
Severe Acute Heart Disease	54	43	25 - 52	56	41	27 - 54
Severe Chronic Heart Disease	66	15	14 - 33	74	16	16 - 35
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	83	4	1 - 13	93	6	0 - 19
Gynecologic Disease	8	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	130	2	1 - 8	107	4	1 - 11
Musculoskeletal/Skin Conditions	72	4	0 - 16	85	1	0 - 11
Neuropsychiatric/Sensory Disease	24	0	0 - 38	46	7	0 - 57
Urologic Disease	53	2	0 - 24	52	0	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	102
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	56
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	0
Registered Nurses:	96
Licensed Practical Nurses:	41

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THOMAS JEFFERSON UNIV HOSP

11TH WALNUT ST
PHILADELPHIA, PA 19107

Medicare Hospital Provider Number: 390174

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,428	8	9 - 13	3,282	9	10 - 14
Cancer	216	35	34 - 52	216	38	34 - 53
Cerebrovascular Accidents	65	15	19 - 38	48	13	19 - 40
Gastrointestinal Catastrophes	26	27	19 - 57	25	32	13 - 53
Infectious Disease	36	31	20 - 53	20	30	16 - 58
Metabolic/Electrolyte Disorders	45	20	17 - 46	32	31	16 - 51
Pulmonary Disease	69	26	17 - 40	79	27	22 - 44
Renal Failure	28	4	3 - 52	34	18	7 - 57
Severe Acute Heart Disease	59	27	24 - 49	80	35	29 - 52
Severe Chronic Heart Disease	99	18	14 - 31	102	21	18 - 36
Severe Trauma	7	14	9 - 67	11	9	10 - 55
Gastrointestinal Disease	156	1	1 - 7	171	1	2 - 7
Gynecologic Disease	33	0	0 -100	40	2	0 - 98
Low-Risk Heart Disease	575	5	2 - 6	592	3	3 - 6
Musculoskeletal/Skin Conditions	380	2	1 - 5	345	2	1 - 5
Neuropsychiatric/Sensory Disease	127	2	1 - 9	135	0	1 - 5
Urologic Disease	121	1	0 - 9	119	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	658
Occupancy Rate (%):	83
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	833
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	246
Registered Nurses:	909
Licensed Practical Nurses:	42

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

Thomas
Jefferson
University
Hospital

Office of the
Executive Director

Philadelphia, PA 19107

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Although the mortality data for Thomas Jefferson University Hospital are below the predicted range, our staff will continue to perform ongoing quality reviews. Quality has always been our priority, and indepth quality review is critical to maintaining the Jefferson standard. We encourage patients who have questions about quality to discuss them with their doctors.

Even though the HCFA data show Jefferson in a good light, it is virtually impossible to draw firm conclusions about a hospital from mortality data. The information only suggests areas where more detailed review might be indicated. Higher mortality rates are expected at hospitals with patients who are very critically ill. For instance, some hospitals admit large number of Medicare patients with multiple medical problems, including cancer. This is why we, at Jefferson, submit individual cases for peer review by other doctors to assure that quality care is provided in every case.

The Federal Administration itself has acknowledged that mortality rates are not a good measure of relative quality at different hospitals. It has attempted to refine the data to take account of some factors, such as age, which may explain legitimate differences in mortality rates. However, some other important factors have still been ignored. They include how severely-ill patients are at the time of admission and differences in their social and economic backgrounds which can complicate their diseases.

Jefferson staff believe that a patient should have full confidence in his or her doctor and hospital, and that such confidence can contribute to a quicker and more complete recovery from illness. Further, we agree that the public should have access to more valid information about the quality of care. We encourage all our patients and their families to raise concerns and to ask questions of their physicians and hospital staff.

Sincerely yours,

Michael J. Bradley
Executive Director

TITUSVILLE HOSP

406 W OAK ST
TITUSVILLE, PA 16354

Medicare Hospital Provider Number: 390122

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	625	12	10 - 16	602	13	9 - 16
Cancer	12	58	24 - 76	13	62	24 - 74
Cerebrovascular Accidents	28	7	18 - 41	22	18	12 - 46
Gastrointestinal Catastrophes	6	0	8 - 60	4	50	9 - 85
Infectious Disease	10	40	13 - 70	3	33	2 - 86
Metabolic/Electrolyte Disorders	4	25	1 - 84	8	13	5 - 60
Pulmonary Disease	55	33	19 - 45	48	27	14 - 41
Renal Failure	2	50	2 - 92	2	50	7 - 96
Severe Acute Heart Disease	19	21	25 - 63	24	17	18 - 50
Severe Chronic Heart Disease	35	26	14 - 43	35	26	11 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	50	0	1 - 11	53	4	0 - 20
Gynecologic Disease	6	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	75	1	1 - 10	66	3	1 - 14
Musculoskeletal/Skin Conditions	66	5	1 - 18	53	4	0 - 29
Neuropsychiatric/Sensory Disease	12	8	0 - 97	13	0	0 - 93
Urologic Disease	24	8	0 - 97	23	13	0 - 89

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	100
Occupancy Rate (%):	42
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	26
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	73
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

TROY COMMUNITY HOSP INC

100 JOHN ST
TROY, PA 16947

Medicare Hospital Provider Number: 390213

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	212	13	10 - 20	266	16	9 - 19
Cancer	4	25	13 - 86	8	50	15 - 76
Cerebrovascular Accidents	12	25	10 - 59	9	44	10 - 68
Gastrointestinal Catastrophes	1	0	0 - 98	1	100	2 - 97
Infectious Disease	6	17	13 - 75	2	50	2 - 92
Metabolic/Electrolyte Disorders	11	27	15 - 67	6	17	2 - 70
Pulmonary Disease	16	38	11 - 57	26	15	18 - 49
Renal Failure	0	-	-	1	100	3 - 99
Severe Acute Heart Disease	1	0	1 - 97	7	71	16 - 77
Severe Chronic Heart Disease	18	39	9 - 53	15	33	8 - 55
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	7	0	0 -100	24	4	0 - 63
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	24	0	0 - 30	23	4	0 - 47
Musculoskeletal/Skin Conditions	17	0	0 - 79	23	4	0 - 80
Neuropsychiatric/Sensory Disease	9	0	0 - 99	11	9	0 - 99
Urologic Disease	7	0	0 - 96	10	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	45
Occupancy Rate (%):	29
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	11
Percent of Physicians Who Are Board Certified Specialists:	55
Interns and Residents:	0
Registered Nurses:	18
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

TYLER MEMORIAL HOSP

ROUTE 6 RD 1
TUNKHANNOCK, PA 18657

Medicare Hospital Provider Number: 390192

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	688	10	9 - 14	715	11	9 - 15
Cancer	10	60	16 - 72	10	50	21 - 78
Cerebrovascular Accidents	27	30	15 - 50	25	40	10 - 49
Gastrointestinal Catastrophes	3	0	8 - 81	2	0	2 - 89
Infectious Disease	7	29	13 - 74	9	22	13 - 67
Metabolic/Electrolyte Disorders	12	42	10 - 64	9	67	7 - 66
Pulmonary Disease	45	20	15 - 41	62	29	16 - 41
Renal Failure	1	0	2 - 97	0	-	-
Severe Acute Heart Disease	30	33	25 - 59	22	14	19 - 50
Severe Chronic Heart Disease	31	13	11 - 37	38	21	13 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	49	0	2 - 11	75	3	1 - 13
Gynecologic Disease	1	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	148	1	2 - 7	129	2	1 - 7
Musculoskeletal/Skin Conditions	65	0	0 - 11	64	0	1 - 9
Neuropsychiatric/Sensory Disease	17	12	0 -100	18	0	0 - 98
Urologic Disease	13	0	0 - 91	15	13	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	89
Occupancy Rate (%):	53
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	20
Percent of Physicians Who Are Board Certified Specialists:	85
Interns and Residents:	0
Registered Nurses:	80
Licensed Practical Nurses:	34

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

TYRONE HOSP

CLAY AVE EXTENSION
TYRONE, PA 16686

Medicare Hospital Provider Number: 390152

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	426	9	8 - 14	420	11	7 - 14
Cancer	4	75	13 - 86	5	60	11 - 82
Cerebrovascular Accidents	20	5	13 - 39	9	44	9 - 68
Gastrointestinal Catastrophes	1	0	1 - 97	1	100	3 - 99
Infectious Disease	6	33	10 - 76	3	33	2 - 86
Metabolic/Electrolyte Disorders	4	50	1 - 84	7	14	2 - 66
Pulmonary Disease	20	20	15 - 52	25	12	13 - 42
Renal Failure	1	0	3 - 98	0	-	-
Severe Acute Heart Disease	13	69	21 - 69	16	44	16 - 63
Severe Chronic Heart Disease	22	23	12 - 48	32	28	9 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	43	0	0 - 15	35	3	0 - 25
Gynecologic Disease	6	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	68	1	2 - 11	74	4	1 - 14
Musculoskeletal/Skin Conditions	34	6	0 - 43	33	6	0 - 33
Neuropsychiatric/Sensory Disease	10	0	0 -100	2	0	0 -100
Urologic Disease	23	4	0 - 91	25	4	0 - 84

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	59
Occupancy Rate (%):	44
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

UNION CITY MEMORIAL HOSP

130 N MAIN ST
UNION CITY, PA 16438

Medicare Hospital Provider Number: 390040

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	215	17	8 - 19	255	11	8 - 17
Cancer	2	0	6 - 89	3	67	11 - 92
Cerebrovascular Accidents	11	45	9 - 64	8	38	5 - 67
Gastrointestinal Catastrophes	2	100	9 - 92	3	67	6 - 87
Infectious Disease	6	83	16 - 77	0	-	-
Metabolic/Electrolyte Disorders	6	17	2 - 72	1	0	0 -100
Pulmonary Disease	24	25	6 - 43	34	18	12 - 41
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	3	33	2 - 86	7	71	13 - 74
Severe Chronic Heart Disease	15	53	6 - 56	10	10	11 - 56
Severe Trauma	0	-	-	1	100	1 - 97
Gastrointestinal Disease	15	7	0 - 59	33	0	0 - 21
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	36	3	0 - 25	44	0	0 - 13
Musculoskeletal/Skin Conditions	14	0	0 - 73	23	4	0 - 67
Neuropsychiatric/Sensory Disease	3	0	0 -100	2	0	0 -100
Urologic Disease	3	0	0 -100	5	40	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	35
Occupancy Rate (%):	49
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	30
Interns and Residents:	0
Registered Nurses:	24
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

union city
memorial
hospital

October 24, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

After reviewing the 1987 mortality data recently released by your agency, there are certain inconsistencies that surface. While my observations are specifically related to this hospital, I believe they reflect a pattern that is applicable to all facilities whose information is arrayed in this format.

One of the major concerns in utilizing the data lies in the significant variances between the Medpar information and the hospital's recorded statistics. As a case in point, Medpar data reveal 215 cases for this facility whereas the recorded Medicare admissions totalled 422 for 1987. Inasmuch as the discrepancies between the number of deaths reported in the HCFA study and those recorded by the hospital were easily reconciled, the use of Medpar data as the denominator can inflate the mortality rate and, in this instance, has more than doubled it. Obviously, the mortality rate would be cut in half, if the study was based on the total Medicare admissions rather than the incomplete claims data generated by Medpar.

Another clarification essential to a better understanding of the data is the impact of age on the mortality rate. I cannot comment on your methodology, which states that a lineal and quadratic function of age was used, rather than assign patients to an age category. However, a review of the hospital's statistics indicated that nearly 30% of the Medicare admissions were people 80 years of age or older, with the reported deaths representing close to 50% of the patients in that age category. Certainly, as the age increases, the predicted mortality rate increases as well.

In addition, the cause of death is not necessarily the reason requiring hospitalization. An example is a 77 year old patient who was admitted to the hospital for hypoglycemic shock. While the patient was successfully treated for that condition, he/she was also suffering from metastatic cancer of the lungs which was the cause of death. According to the study, the patient's death has been recorded under all other diseases.

Under the circumstances, I believe the methodology employed contains certain shortcomings that can lead to significant misinterpretation of the data. While I do not take issue with the intent of the study, the present state of development suggests further refinement before it can be acknowledged as meetings its objective.

Sincerely,

Thomas McLoughlin

Thomas McLoughlin
Executive Director

TM/nj

UNIONTOWN HOSP

500 W BERKLEY ST
UNIONTOWN, PA 15401

Medicare Hospital Provider Number: 390041

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,655	15	11 - 15	2,819	15	11 - 15
Cancer	58	74	32 - 58	61	54	28 - 57
Cerebrovascular Accidents	134	31	18 - 36	101	33	19 - 39
Gastrointestinal Catastrophes	14	43	19 - 69	18	44	19 - 65
Infectious Disease	54	41	25 - 55	50	28	24 - 54
Metabolic/Electrolyte Disorders	65	18	12 - 38	59	29	13 - 42
Pulmonary Disease	160	29	22 - 39	152	35	17 - 36
Renal Failure	22	45	16 - 69	19	68	20 - 74
Severe Acute Heart Disease	117	48	27 - 48	139	51	30 - 49
Severe Chronic Heart Disease	143	17	17 - 31	180	23	17 - 31
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	192	5	1 - 9	227	3	2 - 7
Gynecologic Disease	18	0	0 -100	18	0	0 - 93
Low-Risk Heart Disease	379	3	2 - 6	425	4	2 - 7
Musculoskeletal/Skin Conditions	162	5	1 - 10	173	3	1 - 9
Neuropsychiatric/Sensory Disease	35	9	0 - 83	50	0	0 - 17
Urologic Disease	123	3	0 - 12	139	2	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 230
Occupancy Rate (%): 63
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 73
Percent of Physicians Who Are Board Certified Specialists: 73
Interns and Residents: 0
Registered Nurses: 198
Licensed Practical Nurses: 0

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

Provider Number: 390041

the
uniontown
hospital

500 W. Berkeley Street • Uniontown, PA 15401 • Telephone (412) 430-5000

William L. Roper, M.D., Administrator
Department of Health and Human Services
Health Care Financing Administration
Health Standards & Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, Maryland 21207

October 18, 1988

Dear Dr. Roper:

The Uniontown Hospital received the mortality information provided by HCFA on September 19, 1988. This data was reviewed for accuracy by our staff and certain corrections are necessary based on our internal information. This information is presented on the attached sheet for your review.

We at The Uniontown Hospital recognize that our consumers have a legitimate interest in obtaining useful reliable information on the quality of care that is available to them. We believe that assessment of care and hospital performance is dependent upon many variables, and mortality rates, by themselves, do not measure quality. Quality can only be evaluated through the process of peer review -- not through statistical comparisons.

In addition, mortality is affected by a variety of circumstances other than hospital care, such as preventive health care measures, social factors, patient compliance with physician instruction, availability and accessibility of medical care, and timeliness of diagnosis and admission. Death within thirty days of a hospital admission may be completely unrelated to the hospital and physician care.

Mortality rates are also impacted by how sick patients are upon admission to the hospital, and at this time HCFA's data does not reflect this characteristic. For instance, a focused analysis of the specific deaths reported for our hospital in the categories of Cancer and Severe Acute Heart Disease showed that:

- 46% of all Cancer patients had three or more co-existing medical problems.
- 52% of Severe Acute Heart Disease patients had three or more co-existing medical problems.
- 54% of the Cancer patients were admitted through the Emergency Room in acute distress at the time of admission.
- 96% of the Severe Acute Heart Disease patients were admitted through the Emergency Room in acute distress at the time of admission.
- The average age of the Cancer patients who died was 73.
- The average age of the Severe Acute Heart Disease patients who died was 76.

This information provides an indication of how severely ill the patients in these two categories were upon admission.

VHA.
Member of
Voluntary Hospitals
of America, Inc.

Under the Quality Assurance Program, designed to monitor and evaluate the quality of care rendered to patients of The Uniontown Hospital, the medical and hospital staff conduct regular comprehensive peer analysis of the clinical practices and activities within the hospital. As part of this review, the medical staff does review all deaths. This program follows the guidelines and regulations of the Joint Commission on Accreditation of Healthcare Organizations - (JCAHO). This analysis is a planned; systematic and ongoing monitoring and evaluation of patient care to allow opportunities to improve care to be quickly and efficiently identified and addressed. The Uniontown Hospital implemented MedisGroups, a severity of illness grouping system, on January 1, 1987. This system will provide data to the physicians for utilization and review focusing toward quality medical care. The HCFA mortality data will be reevaluated to identify trends, patterns, and/or indications for focused peer review.

The Uniontown Hospital is a non-profit 230-bed facility located in Uniontown, Fayette County, Pennsylvania. Its medical staff of more than 120 physicians represents virtually all medical specialities and disciplines. We are primarily an acute care facility meeting the health care needs of more than 159,000 residents in Fayette County as well as residents of neighboring Greene and Washington counties and outlying communities in West Virginia and Maryland. Some 25,382 individuals, or 16.2% of the population in Fayette County are over the age of 65. This elderly population is continuing to increase, and it is anticipated that some 17% of the population will be over the age of 65 in 1991. In 1987, Medicare patients constituted 52.4% of our admissions.

Serving a significantly older population, The Uniontown Hospital is committed to providing community services which improve the quality of life for the elderly and their families. Programs for the elderly that the hospital sponsors include **Priority Care**, a senior card program for persons 55 years and older which offers a variety of complimentary benefits and health care services; **Lifeline**, a personal emergency response system for the homebound; community outreach programs **Alzheimer's Family Support Group, Arthritis Self-Help, Cardiac Club, Diabetic Support Group, I Can Cope Cancer Series,** and **Stroke Club.**

Additionally, The Uniontown Hospital is developing a 50-apartment, elderly housing unit for Fayette County. This housing program is directly responsive to locally recognized needs of the elderly. The hospital also is a partner in the new Fayette Regional Radiation Therapy Center which receives many of the hospital's cancer patients for treatment. The Uniontown Hospital spearheaded the feasibility study for a regional radiation therapy facility for Fayette County. Along with the radiation therapy facility, Uniontown Hospital is also affiliated with a Medicare certified home health care agency and a durable medical equipment company. In association with these services, Uniontown Hospital ensures a continuum of quality health care for its elderly patients.

Our hospital, medical staff, and governing body are committed to providing high quality patient care, as demonstrated by our establishment of a formal comprehensive Quality Assurance Program. Thank you for the opportunity to comment prior to the publication of our mortality statistics.

William J. Grego, Jr.

William J. Grego, Jr.
President, The Uniontown Hospital

Riad Saradar, M.D.
President, Medical Staff

UNITED COMMUNITY HOSP

RD 5 BOX 5005 CRANBERRY RD
GROVE CITY, PA 16127

Medicare Hospital Provider Number: 390266

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,045	13	10 - 15	1,009	12	10 - 15
Cancer	24	58	27 - 67	21	48	25 - 67
Cerebrovascular Accidents	45	31	15 - 43	39	31	20 - 50
Gastrointestinal Catastrophes	8	25	14 - 72	7	43	10 - 74
Infectious Disease	10	20	14 - 65	4	25	5 - 80
Metabolic/Electrolyte Disorders	19	11	10 - 46	13	23	4 - 55
Pulmonary Disease	90	23	15 - 35	75	23	15 - 37
Renal Failure	5	100	12 - 74	4	50	15 - 95
Severe Acute Heart Disease	44	39	24 - 54	52	38	24 - 52
Severe Chronic Heart Disease	46	30	15 - 42	51	24	16 - 40
Severe Trauma	1	100	3 - 99	0	-	-
Gastrointestinal Disease	76	4	1 - 14	72	1	1 - 11
Gynecologic Disease	12	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	177	5	1 - 9	172	2	2 - 7
Musculoskeletal/Skin Conditions	94	2	1 - 10	75	3	1 - 12
Neuropsychiatric/Sensory Disease	22	0	0 - 60	18	6	0 - 99
Urologic Disease	35	6	0 - 90	46	2	0 - 27

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	128
Occupancy Rate (%):	50
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	34
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	120
Licensed Practical Nurses:	30

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

United Community Hospital
102 Cranberry Road Grove City, Pennsylvania 16127-9703 Telephone (412) 458-5442

October 20, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

This letter is in response to HCFA 1987 mortality data.

In your statistics, you have the number of beds at United Community Hospital listed as 102. United Community Hospital has 128 licensed beds as of 1981.

HCFA listed the total number of physicians at United Community Hospital as 29. The total number of physicians at United Community Hospital in 1986 was 74.

The five cases in which renal failure was the primary diagnosis were reviewed in detail. It was found all cases contained secondary diagnoses. All five cases also had coronary problems. One had a ruptured aneurysm; one had a malignancy (stage IV); one had been found after lying the bathtub at home for three days.

In all five patients, the illness was end stage and severity of illness was high.

Sincerely,

Carl Felling

Carl Felling
Administrator

CF/kmf

UNIVERSITY HOSP MILTON HERSHEY MED C
500 UNIVERSITY DR
HERSHEY, PA 17033

Medicare Hospital Provider Number: 390256

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,039	9	9 - 13	2,067	10	10 - 15
Cancer	110	32	30 - 52	132	31	31 - 52
Cerebrovascular Accidents	39	23	13 - 41	56	25	16 - 40
Gastrointestinal Catastrophes	13	46	15 - 67	11	18	13 - 62
Infectious Disease	21	52	20 - 63	26	42	22 - 61
Metabolic/Electrolyte Disorders	14	21	15 - 60	28	29	10 - 47
Pulmonary Disease	45	18	15 - 40	52	27	14 - 41
Renal Failure	23	9	2 - 58	27	7	6 - 55
Severe Acute Heart Disease	63	32	25 - 50	79	43	26 - 49
Severe Chronic Heart Disease	66	23	16 - 38	68	19	15 - 35
Severe Trauma	4	0	8 - 73	5	0	7 - 66
Gastrointestinal Disease	74	3	1 - 13	77	3	0 - 14
Gynecologic Disease	12	0	0 -100	24	0	0 -100
Low-Risk Heart Disease	368	7	2 - 8	306	4	2 - 7
Musculoskeletal/Skin Conditions	185	1	1 - 6	217	1	0 - 5
Neuropsychiatric/Sensory Disease	49	2	0 - 32	65	2	0 - 14
Urologic Disease	140	0	0 - 6	53	0	0 - 24

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	331
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	119
Registered Nurses:	554
Licensed Practical Nurses:	25

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

PENNSTATE

College of Medicine • University Hospital
The Milton S. Hershey Medical Center

Hospital Administration

P.O. Box 850
Hershey, Pennsylvania 17033
(717) 531-8800

October 14, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Hospital Mortality Information
P. O. Box 26684
Baltimore, MD 21207

ATTN: William L. Roper, M.D.

Dear Dr. Roper:

The University Hospital of Milton S. Hershey Medical Center, Pennsylvania State University, (Medicare Provider #390256), is a regional tertiary care referral center, and the only medical college in Central Pennsylvania. We offer a broad spectrum of services; comprehensive outpatient care, medical and surgical cardiology, oncology (including experimental oncology treatment), pancreatic, renal and cardiac transplantation and FDA approval for use of an artificial heart. The hospital is a state designated level one trauma center. Many of our patients are referred here for care not available elsewhere in Central Pennsylvania.

The case mix index for this institution was 1.5484 in 1987 . This is the 7th highest in Pennsylvania. This case mix index is a rough indicator of the complexity of illness in the patients we serve.

The HCFA data gives us an overall mortality rate which is at the low end of the predicted range, however we do have some concerns about the methodology used. The formula for predicting the individualized mortality range has not been tested for validity or reliability. Covariants in the formula include age, transfer status and selected comorbidities, but there is no assurance that these covariants are weighted in a valid or proper fashion. Many of our patients have more than four comorbidities but only four can be reported to HCFA. Therefore, the statistical computation may not be accounting for all patients with significant comorbidities. The accuracy of the comorbidity factor is questionable until all comorbidities can be accepted by HCFA.

Surgical procedures are not taken into consideration by the statistical model. We contend that a major surgical procedure in an elderly patient may be a significant factor in predicting outcome. Finally, the formula utilizes the principal diagnosis during the patient's last admission. In fact, the principal diagnosis may not reflect the major diagnosis. For example, a cancer patient admitted for chemotherapy or radiation therapy would not be included in cancer category.

The usefulness of this statistical analysis extends only to its function as a screening tool to identify areas for closer review. The quality of care rendered must then be examined on a case by case basis. The staff of University Hospital did, in fact, closely evaluate medical records from one of the diagnostic categories; low risk heart disease. The cases designated as deaths within 30 days of admission were processed through MedisGroups, our severity of illness scoring system. This review indicated that a very high percentage of these patients had a moderate to high severity of illness score. Those cases with lower admission severity scores were more closely evaluated. These patients had comorbidities which were undiagnosed prior to admission. Thereby giving a false low severity score. These patients were in fact very ill and their deaths were not unexpected. It must be remembered that death is not in itself an indicator of poor medical care. Rather in cases of terminal illness quality medical care may be exemplified by foregoing aggressive, but futile treatment. A death within 30 days of admission, or occurring outside the hospital may be an example of appropriate palliative care.

While we were certainly pleased to see the low mortality rates in relation to our predicted range, we believe that our own quality assurance activities have more relevance in identifying quality of care provided at The University Hospital, Milton S. Hershey Medical Center. Patients and purchasers of health care should use criteria other than the mortality statistics when selecting a hospital.

Sincerely,

Howard J. Peterson
Director
University Hospital

UNIVERSITY MEDICAL CTR

739 S BROADFITZWATER STS
PHILADELPHIA, PA 19147

Medicare Hospital Provider Number: 390020

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	236	8	7 - 15	194	8	6 - 15
Cancer	2	0	11 - 95	1	0	0 - 98
Cerebrovascular Accidents	4	0	2 - 71	5	0	12 - 68
Gastrointestinal Catastrophes	3	0	2 - 80	0	-	-
Infectious Disease	4	50	3 - 82	6	50	13 - 80
Metabolic/Electrolyte Disorders	10	20	3 - 60	0	-	-
Pulmonary Disease	6	50	7 - 75	9	33	13 - 69
Renal Failure	4	25	11 - 87	1	100	3 - 99
Severe Acute Heart Disease	2	0	8 - 92	4	25	4 - 80
Severe Chronic Heart Disease	20	5	11 - 37	7	14	9 - 65
Severe Trauma	0	-	-	1	0	1 - 97
Gastrointestinal Disease	23	0	0 - 93	23	0	0 - 40
Gynecologic Disease	2	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	23	0	0 - 26	29	0	0 - 23
Musculoskeletal/Skin Conditions	20	5	0 - 97	24	0	0 - 69
Neuropsychiatric/Sensory Disease	6	0	0 -100	3	0	0 -100
Urologic Disease	4	0	0 -100	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	97
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

VALLEY FORGE MED CTR & HOSP

1033 W GERMANTOWN PIKE
NORRISTOWN, PA 19401

Medicare Hospital Provider Number: 390272

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	8	0	0 - 83	7	0	0 - 79
Cancer	1	0	0 - 98	0	-	-
Cerebrovascular Accidents	0	-	-	1	0	0 - 99
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	1	0	0 - 98	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	1	0	0 -100	1	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	1	0	0 -100
Musculoskeletal/Skin Conditions	0	-	-	0	-	-
Neuropsychiatric/Sensory Disease	5	0	0 -100	1	0	0 -100
Urologic Disease	0	-	-	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	67
Ownership/Control:	Private, For Profit

STAFFING

Interns and Residents:	0
Registered Nurses:	14
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WARMINSTER GENERAL HOSP

225 NEWTOWN RD
WARMINSTER, PA 18974

Medicare Hospital Provider Number: 390260

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,063	14	12 - 17	1,054	14	12 - 17
Cancer	38	45	25 - 59	38	50	28 - 61
Cerebrovascular Accidents	57	25	15 - 39	53	30	16 - 42
Gastrointestinal Catastrophes	11	36	12 - 66	14	36	17 - 67
Infectious Disease	40	42	20 - 53	33	45	18 - 55
Metabolic/Electrolyte Disorders	21	19	12 - 50	29	21	9 - 44
Pulmonary Disease	70	30	17 - 41	77	36	14 - 38
Renal Failure	3	33	4 - 87	5	40	9 - 83
Severe Acute Heart Disease	50	46	31 - 59	45	29	28 - 56
Severe Chronic Heart Disease	77	18	14 - 33	75	24	15 - 36
Severe Trauma	2	50	1 - 93	3	0	4 - 79
Gastrointestinal Disease	56	7	0 - 28	55	0	0 - 11
Gynecologic Disease	10	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	149	1	1 - 6	163	2	2 - 7
Musculoskeletal/Skin Conditions	108	3	1 - 10	99	1	1 - 8
Neuropsychiatric/Sensory Disease	22	0	0 - 61	33	3	0 - 49
Urologic Disease	30	0	0 - 50	29	0	0 - 22

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	181
Ownership/Control:	Private, For Profit

STAFFING

Interns and Residents:	4
Registered Nurses:	71
Licensed Practical Nurses:	111

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WGH Medical Center
Warminster General Hospital
A Member of United Hospitals, Inc.

Frank L. Fumai
Executive Director

225 Newtown Road
Warminster, PA 18974
(215) 441-6601

October 20, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services

Provider #39-0260

Dear Mr. Roper:

Warminster General Hospital and Trauma Center of Warminster Township, Warminster, Pennsylvania has received the HCFA Mortality Statistics and reviewed this information. We are a 200-bed acute care facility that is a major referral center for trauma and as a result is accredited by the Pennsylvania Trauma System Foundation as a Level II Regional Trauma Center. We treat many patients with significant medical and surgical illnesses.

The statistics that we received measure the relationship between mortality and a selected group of patient characteristics, but the statistics do not measure the hospital performance in terms of quality of care provided. A mortality rate higher than predicted does not confirm the existence of quality problems, just as a mortality rate lower than predicted does not establish that a hospital provides high quality care. The model used by HCFA has not been tested and validated sufficiently to be a proven predictor of patient mortality. This model assumes that all patients are "average" and several important factors such as severity of illness, socio-economic status, or the presence of a terminal illness are not considered appropriately.

As a hospital accredited by the Joint Commission on Accreditation of Healthcare Organizations, the quality of care provided to our patients is of the utmost concern to our governing body, management and medical staff. We have in place an ongoing program which monitors and evaluates all aspects of patient care. The cornerstone of our program is the peer review activities performed by our medical staff. Mortality review is an important aspect of our program and one of the many methodologies utilized to focus peer review activities, all of which are geared towards identification of opportunities to improve care.

Since the HCFA data applies only to Medicare patients, it is not representative of the entire patient population treated and is therefore misleading. In addition, critical factors such as the severity of illness upon admission, the admitting status (emergency, admission from nursing home, etc.) and the physiologic condition at the time of admission are not considered. These factors will have an impact on the mortality rate.

In addition, this data selects the last of multiple admissions for a patient. This tends to increase and overstate the mortality rate. Since the data relate to Medicare deaths occurring within 30 days of the last admission, deaths following discharge are also included. The data cannot be used effectively to draw conclusions on a hospital's performance.

Although Warminster General Hospital was well within the predicted mortality ranges in all of the published categories, this data is only able to provide very simplistic statistical comparisons. The quality of care can only be determined through extensive study performed by qualified practitioners. Through our on-going monitoring activities, acquisition of state of the art equipment, and continual upgrading and expansion of facility, we strive every day to provide the best care possible to each of our patients.

Our mission is to deliver high quality health care services. We believe in healthcare consumerism and the right of the public to to know valid information from which they can make informed decisions. However, these mortality statistics, while a start, do not fully achieve this goal.

We would like to thank HCFA for the opportunity to comment on the release of Medicare Mortality data for 1987.

Sincerely,

Frank L. Fumai

Frank L. Fumai
Executive Director

/pm

cc: Myles Turtz, M.D.
Anthony Gigliotti

WARREN GENERAL HOSP

2-12 CRESCENT PARK WEST
WARREN, PA 16365

Medicare Hospital Provider Number: 390146

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,164	13	10 - 15	1,236	11	10 - 15
Cancer	43	42	28 - 59	37	46	32 - 66
Cerebrovascular Accidents	45	22	16 - 42	54	20	19 - 42
Gastrointestinal Catastrophes	21	38	20 - 63	14	21	10 - 56
Infectious Disease	28	29	18 - 54	33	30	16 - 51
Metabolic/Electrolyte Disorders	27	26	12 - 49	30	10	10 - 40
Pulmonary Disease	56	20	12 - 36	46	17	13 - 38
Renal Failure	4	25	5 - 82	1	100	2 - 97
Severe Acute Heart Disease	47	47	25 - 54	47	38	26 - 55
Severe Chronic Heart Disease	69	25	15 - 36	80	20	14 - 33
Severe Trauma	1	100	2 - 97	1	0	1 - 97
Gastrointestinal Disease	68	3	1 - 14	81	5	1 - 15
Gynecologic Disease	8	0	0 -100	15	0	0 -100
Low-Risk Heart Disease	136	4	2 - 9	138	5	1 - 11
Musculoskeletal/Skin Conditions	131	2	1 - 9	125	4	1 - 10
Neuropsychiatric/Sensory Disease	58	2	0 - 15	62	0	1 - 9
Urologic Disease	62	0	0 - 15	52	0	0 - 18

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	123
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	59
Percent of Physicians Who Are Board Certified Specialists:	54
Interns and Residents:	0
Registered Nurses:	128
Licensed Practical Nurses:	24

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

WASHINGTON HOSPITAL

155 WILSON AVENUE
WASHINGTON, PA 15301

Medicare Hospital Provider Number: 390042

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,471	14	11 - 15	3,559	13	11 - 15
Cancer	109	42	29 - 52	99	48	31 - 55
Cerebrovascular Accidents	110	20	19 - 36	119	25	20 - 37
Gastrointestinal Catastrophes	27	33	20 - 59	20	50	20 - 64
Infectious Disease	30	40	21 - 58	38	47	27 - 62
Metabolic/Electrolyte Disorders	55	25	15 - 44	73	27	16 - 43
Pulmonary Disease	251	23	19 - 34	262	24	19 - 34
Renal Failure	39	46	18 - 67	22	50	15 - 70
Severe Acute Heart Disease	134	49	28 - 48	139	37	29 - 48
Severe Chronic Heart Disease	224	28	17 - 30	220	21	17 - 30
Severe Trauma	1	0	2 - 97	5	0	7 - 66
Gastrointestinal Disease	243	2	1 - 6	270	3	1 - 7
Gynecologic Disease	20	0	0 -100	31	0	0 -100
Low-Risk Heart Disease	411	4	2 - 6	410	3	2 - 6
Musculoskeletal/Skin Conditions	386	3	1 - 6	393	3	1 - 5
Neuropsychiatric/Sensory Disease	81	2	1 - 12	117	1	1 - 7
Urologic Disease	103	3	0 - 13	112	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	296
Occupancy Rate (%):	77
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	155
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	16
Registered Nurses:	319
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

THE WASHINGTON HOSPITAL

155 Wilson Avenue
Washington, PA 15301
412-225-7000

TRADITIONAL VALUES
FOR TODAY'S TIMES

Office Of
The President

October 21, 1988

Mrs. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

The Washington Hospital has reviewed the data on 1987 mortality statistics included with your letter of September 15, 1988.

In the Hospital Characteristics Section of the data, the following information should be updated for 1987 as indicated below:

Number of Beds - 296
Occupancy Rate - 77%
Number of Physicians - 155
Percent of Physicians with Board Certification - 85%
Interns and Residents per Bed - .06
Registered Nurses per Bed - 1.23
Licensed Practical Nurses per Bed - .05

The Hospital has verified the number of inpatient deaths per category, and attempted to verify a random sample of the deaths that occurred after discharge from The Washington Hospital. In the category of severe acute heart disease, HCFA listed 134 patients and 65 deaths, resulting in an actual mortality rate of 49%. We have verified that two of these patients were transferred to Allegheny General Hospital in Pittsburgh, Pennsylvania and expired there. Therefore, these patients should not have been included in our rate. Our rate should be 47% rather than 49%. In the category of severe chronic heart disease, HCFA listed 224 patients and 62 deaths, resulting in an actual mortality rate of 28%. We have verified that one patient in this category was transferred to Allegheny General Hospital and expired there. Therefore, this patient should not have been included in our rate. Our rate for this category should be 27% rather than 28%.

Had we taken the opportunity to verify deaths after discharge in the other 14 categories, it is our opinion that it is possible that we would have discovered other errors in the number of deaths.

Although we have noted HCFA's comments that significant changes have been made to the methodology used to determine mortality rates, we wish to emphasize that quality of care cannot be measured by mortality rates without consideration for severity of illness and other patient-specific factors.

Sincerely,

E. L. Strosser
President

ELS:dd

WAYNE CNTY MEM HOSP

PARK WEST STS
HONESDALE, PA 18431

Medicare Hospital Provider Number: 390125

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	893	13	10 - 15	886	15	10 - 16
Cancer	23	48	20 - 61	16	50	23 - 70
Cerebrovascular Accidents	44	27	16 - 43	41	34	15 - 45
Gastrointestinal Catastrophes	7	43	11 - 75	3	0	2 - 80
Infectious Disease	20	20	13 - 51	21	43	16 - 59
Metabolic/Electrolyte Disorders	7	29	2 - 72	6	50	6 - 75
Pulmonary Disease	59	32	16 - 41	58	26	15 - 40
Renal Failure	2	50	2 - 92	5	60	12 - 86
Severe Acute Heart Disease	45	47	23 - 53	56	32	24 - 50
Severe Chronic Heart Disease	62	16	15 - 35	55	24	13 - 36
Severe Trauma	2	50	0 - 94	0	-	-
Gastrointestinal Disease	56	2	0 - 17	60	7	0 - 29
Gynecologic Disease	5	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	102	3	1 - 10	91	3	1 - 11
Musculoskeletal/Skin Conditions	83	2	0 - 13	95	0	1 - 6
Neuropsychiatric/Sensory Disease	34	0	0 - 28	24	0	0 - 71
Urologic Disease	29	0	0 - 35	25	0	0 - 72

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	119
Occupancy Rate (%):	67
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	41
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	107
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WAYNESBORO HOSP

E MAIN ST
WAYNESBORO, PA 17268

Medicare Hospital Provider Number: 390138

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	775	14	11 - 17	762	14	11 - 17
Cancer	30	57	25 - 61	22	55	21 - 62
Cerebrovascular Accidents	25	32	10 - 47	30	13	18 - 45
Gastrointestinal Catastrophes	8	38	14 - 75	5	40	4 - 78
Infectious Disease	24	17	20 - 54	14	7	17 - 54
Metabolic/Electrolyte Disorders	18	33	6 - 53	13	23	4 - 55
Pulmonary Disease	49	27	14 - 41	40	42	13 - 45
Renal Failure	4	75	16 - 93	5	100	18 - 80
Severe Acute Heart Disease	38	42	24 - 56	44	34	25 - 54
Severe Chronic Heart Disease	49	12	15 - 36	48	21	14 - 38
Severe Trauma	0	-	-	1	0	0 - 98
Gastrointestinal Disease	42	2	1 - 18	51	6	1 - 23
Gynecologic Disease	9	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	74	5	1 - 15	83	2	1 - 11
Musculoskeletal/Skin Conditions	53	6	0 - 27	62	2	1 - 12
Neuropsychiatric/Sensory Disease	19	0	0 - 56	14	0	0 - 47
Urologic Disease	50	0	0 - 23	36	0	0 - 55

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 88
Occupancy Rate (%): 55
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 43
Percent of Physicians Who Are Board Certified Specialists: 77
Interns and Residents: 0
Registered Nurses: 85
Licensed Practical Nurses: 25

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

WAYNESBORO HOSPITAL • EAST MAIN ST. • WAYNESBORO, PA 17268

October 5, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, MD 21207

Re: Medicare Hospital Mortality Information
Waynesboro Hospital: ID #390138

Dear Ms. Kappert

Your "Hospital Characteristics" for Waynesboro Hospital do not match the AHA 1986 survey referenced. The information in that survey should have allowed you to produce the following characteristics:

Beds:	88
Occupancy:	52%
Physicians:	45
Board Certified (35):	78%
RNs per bed:	0.95
LPNs per bed:	0.30
Listed Spec. Svcs:	
CCU:	Yes*
Hospice Care:	Yes**

* Mixed ICU/CCU
** Hospice Program Sponsored by others. Our facilities used for inpatient care requirement of clients.

Sincerely,

William G. George
President

WGG/lh

WESTERN PA HOSPITAL

4800 FRIENDSHIP AVE
PITTSBURGH, PA 15224

Medicare Hospital Provider Number: 390090

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,561	12	11 - 15	3,684	12	11 - 15
Cancer	174	43	33 - 53	172	46	33 - 54
Cerebrovascular Accidents	113	27	20 - 39	101	21	22 - 39
Gastrointestinal Catastrophes	26	38	22 - 61	33	39	17 - 54
Infectious Disease	30	43	21 - 58	42	43	29 - 62
Metabolic/Electrolyte Disorders	40	30	16 - 49	42	24	13 - 44
Pulmonary Disease	148	28	21 - 39	134	28	20 - 38
Renal Failure	16	25	9 - 64	26	54	21 - 74
Severe Acute Heart Disease	106	35	27 - 48	105	42	31 - 52
Severe Chronic Heart Disease	155	26	18 - 34	179	26	17 - 32
Severe Trauma	5	20	3 - 75	11	9	10 - 56
Gastrointestinal Disease	187	2	2 - 7	198	3	2 - 8
Gynecologic Disease	27	7	0 -100	23	0	0 -100
Low-Risk Heart Disease	691	3	3 - 6	666	5	2 - 6
Musculoskeletal/Skin Conditions	267	1	2 - 6	267	3	1 - 6
Neuropsychiatric/Sensory Disease	129	3	1 - 10	165	2	1 - 8
Urologic Disease	89	3	0 - 17	92	2	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	502
Occupancy Rate (%):	80
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	385
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	76
Registered Nurses:	627
Licensed Practical Nurses:	76

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

4800 Friendship Avenue
Pittsburgh, PA 15224
(412) 578-5000

WEST PENN
HOSPITAL

Friends for life.

Provider # 390090

October 14, 1988

William L. Roper, M.D.
The Administrator
Department of Health & Human Services
Health Care Financing Administration
Washington, D.C. 20201

Dear Dr. Roper:

The mortality data submitted by HCFA was reviewed by The Western Pennsylvania Hospital's quality/utilization review department and the medical staff. We observe from the data that the actual mortality rate for each of the diagnostic categories is at or below the midpoint of the expected mortality ranges. We have analyzed separately the few categories which showed an increase in mortality compared to last year. By the Chi square test, these differences were not statistically significant and can be attributed to random variation.

The absence of dramatic reduction in mortality rates is attributable, we believe, to an increase in the severity of illness of the patients under our care. The increase in the severity, or complexity, is reflected in the increase in our Medicare case mix index, as published in the Federal Register. Increasing technology and medical and hospital staff expertise in a given diagnostic category may have opposing effects on the mortality rate. While these advances should decrease the mortality rate, increased technology and expertise will draw a more severely ill patient population because of referral and tertiary care transfer patterns. Until the mortality data calculations are adjusted for severity of illness in addition to the presence of selected comorbidities, the extent to which these factors effect actual morality rates can only be estimated.

Our analysis indicates that this year our actual mortality rates fall lower within the expected mortality ranges than they did last year. We believe that is a reflection of ongoing quality assurance and mortality review programs.

We are pleased to see that hospital information will accompany the mortality data. This is a positive step towards providing the consumer with information that will be helpful in reviewing and understanding the mortality data. For example, while our actual mortality rate for cancer is at the midpoint of the expected mortality range, it would be substantially lower if The Western Pennsylvania Hospital did not have a palliative program which provides for a continuum of care for the cancer patients.

Provider # 390090

In reference to the AHA information, we are proud to report that in May, 1988, The Western Pennsylvania Hospital put into place new policies which created a nursing staff for direct patient care composed solely of registered nurses. We believe this greatly enhances the quality of care provided to our patients.

We thank you for the opportunity to review the data and to provide comments prior to its publication.

Sincerely,

Steven A. Caywood

Steven A. Caywood
President and Chief Executive Officer

SAC/mg

WESTMORELAND HOSP ASSOC

532 W PITTSBURGH ST
GREENSBURG, PA 15601

Medicare Hospital Provider Number: 390145

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,348	10	10 - 14	3,604	11	10 - 14
Cancer	109	36	34 - 56	114	43	36 - 59
Cerebrovascular Accidents	111	21	19 - 36	109	27	19 - 38
Gastrointestinal Catastrophes	26	19	22 - 57	26	35	18 - 57
Infectious Disease	49	31	22 - 51	36	36	24 - 58
Metabolic/Electrolyte Disorders	90	24	15 - 40	97	28	16 - 41
Pulmonary Disease	167	24	20 - 37	134	34	21 - 40
Renal Failure	11	27	10 - 70	15	27	15 - 71
Severe Acute Heart Disease	96	41	30 - 52	110	39	29 - 50
Severe Chronic Heart Disease	225	18	17 - 29	253	18	17 - 29
Severe Trauma	5	40	2 - 79	3	0	4 - 79
Gastrointestinal Disease	286	2	2 - 7	290	3	2 - 7
Gynecologic Disease	23	0	0 - 99	18	0	0 -100
Low-Risk Heart Disease	476	4	2 - 6	519	3	2 - 6
Musculoskeletal/Skin Conditions	314	3	1 - 6	352	2	1 - 6
Neuropsychiatric/Sensory Disease	171	4	0 - 11	182	2	0 - 8
Urologic Disease	118	2	0 - 11	127	1	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	380
Occupancy Rate (%):	77
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	142
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	360
Licensed Practical Nurses:	31

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

WESTMORELAND-MC GINNIS HOSP

221 WEST MAIN ST
LIGONIER, PA 15658

Medicare Hospital Provider Number: 390252

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	33	6	5 - 25	27	4	5 - 25
Cancer	0	-	-	1	100	3 - 98
Cerebrovascular Accidents	0	-	-	2	0	2 - 88
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	1	0	3 - 99	2	0	1 - 90
Pulmonary Disease	3	0	2 - 80	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	4	50	6 - 82	1	0	0 - 98
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	1	0	0 -100	2	0	0 -100
Musculoskeletal/Skin Conditions	2	0	0 -100	1	0	0 -100
Neuropsychiatric/Sensory Disease	15	0	0 - 76	10	0	0 - 91
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	4
Ownership/Control:	Private, For Profit

STAFFING

Interns and Residents:	0
Registered Nurses:	12
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WILKES-BARRE GENL HOSP

N RIVER AUBURN STS
WILKES BARRE, PA 18764

Medicare Hospital Provider Number: 390064

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,951	12	10 - 14	3,776	11	10 - 14
Cancer	146	33	30 - 51	139	43	31 - 53
Cerebrovascular Accidents	144	24	18 - 34	124	23	18 - 34
Gastrointestinal Catastrophes	31	52	19 - 57	33	21	22 - 55
Infectious Disease	29	34	20 - 57	32	34	22 - 57
Metabolic/Electrolyte Disorders	67	24	13 - 40	70	23	12 - 39
Pulmonary Disease	120	27	17 - 36	136	23	16 - 34
Renal Failure	31	65	16 - 66	29	31	18 - 69
Severe Acute Heart Disease	126	40	28 - 47	135	35	30 - 49
Severe Chronic Heart Disease	218	24	17 - 30	200	23	16 - 30
Severe Trauma	2	50	2 - 92	6	17	5 - 70
Gastrointestinal Disease	252	2	1 - 6	290	3	1 - 6
Gynecologic Disease	47	0	0 - 99	33	0	0 - 64
Low-Risk Heart Disease	528	4	2 - 6	477	3	2 - 5
Musculoskeletal/Skin Conditions	426	3	1 - 6	400	1	1 - 4
Neuropsychiatric/Sensory Disease	95	3	1 - 12	133	5	1 - 12
Urologic Disease	150	1	0 - 8	110	1	1 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	444
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	169
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	301
Licensed Practical Nurses:	77

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

WBGH
A COMPLETE HEALTH CARE CENTER

Wilkes-Barre General Hospital

N. River and Auburn Streets • Wilkes-Barre, PA 18764
(717) 829-8111

October 19, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Sandra Kappert

Dear Ms. Kappert:

Please find attached the Wilkes-Barre General Hospital's (Medicare provider number 390064) commentary and data validation on the 1987 HCFA Mortality Data.

There are two documents enclosed:

1) The Hospital's commentary on the Mortality Data for Publication.

2) Corrections and inconsistencies on the validation of the data not for publication.

Thank you for your attention in this matter.

Sincerely yours,

Thomas P. Saxton

Thomas P. Saxton
President

TPS/sms

Enclosures

WBGH
A COMPLETE HEALTH CARE CENTER

Wilkes-Barre General Hospital

N. River and Auburn Streets • Wilkes-Barre, PA 18764
(717) 829-8111

Medicare Provider #: 390064

The Wilkes-Barre General Hospital (WBGH) is a 444 bed tertiary care facility providing the widest range of services in the Wyoming Valley. Primary services include: Cancer Center including Radiation Therapy; Renal Dialysis Center; Open Heart Surgery; Laser Surgery; MRI; Teaching Center for the Family Practice Residency Program; and 24 hour Emergency Room Coverage.

The Hospital is approved by the Joint Commission on Accreditation of Hospitals. The Medical Staff is comprised of 292 physicians representing over 33 specialities. The Wilkes-Barre General Hospital is committed to the delivery of quality care to the community it serves. This commitment is evidenced by the activity of the Medical Staff and allied health professionals through an on-going Quality Assurance Program. One of the many components of this program is mortality review. Each death occuring in the hospital is reviewed by the Medical Staff considering anticipated death, complications, appropriate treatment and cause of death. Results of this review are tabulated and reported to the Medical Executive Committee, Hospital Administration and the Board of Directors. This mechanism of mortality review provides only one of many vehicles Wilkes-Barre General Hospital utilizes for evaluating the quality of care provided and serves as a means for continual improvement as a result of education, purchase of new equipment and addition of new services.

Promoting consumer awareness of hospital mortality data is a laudable goal providing the data is reliable, accurate and the interpretation can be readily understood by the general public. Raw mortality figures can be misleading without adjustment for important variables such as severity of illness. The HCFA methodology does not account for severity and intensity thus resulting in a wide potential for erroneous results. Under no circumstances can only mortality data be the basis for determining the quality of care that a hospital delivers.

HCFA analysis rests on the assumption that all the patients admitted to all hospitals are similar in the severity of their illness except for a few limited specific characteristics and that all patients in each category received similar treatment. Referral Centers such as WBGH would undoubtly admit different types of patients as well as render different types of care thus decreasing the reliability of the expected mortality ranges. The statistical methodology utilized to compile the data is sound, however, the important question is whether the above assumptions are valid. It is well documented that this model does not consider some of the most important factors that influence the risk of death and, only predicts the chance of death. More conclusive considerations for predicting death along with severity of illness would be whether the death was expected on admission (i.e., patients with a terminal illness) and the actual cause of death. The actual "cause" of death was not utilized, in this model. Although these factors are not used by HCFA they are major components in the mortality review at WBGH.

The reliability of data processing routines used to identify post discharge deaths is unknown thus significant errors in discharge disposition could result in a higher mortality rate. Also there were no thresholds established to determine the number of patients which would qualify as being a "representative" sample. Using this statistical method, too few patients in any one category can result in unreliable data.

The model also includes mortalities which occurred after the patient was discharged from the hospital within 30 days of the admission. The model does not consider that these deaths may be attributable to factors unrelated to the hospital admission, i.e. accidents, other comorbid conditions, expected death in terminal diseases such as cancer, end stage renal disease, and/or mortality related to treatment at home or in an extended care facility.

There are also certain factors that may cause a hospital to have higher mortality rates: Specialized services (cancer and renal centers, burn, hospice and trauma units, tertiary referral centers) and; area shortage of nursing home beds causing patients to be admitted to a hospital in a terminal state.

The data used by HCFA indicates that of a total of 3951 Medicare patients admitted to the WBGH, 471 died within 30 days of admission. Of these, 392 died while hospitalized and 79 were reported to have died after discharge. Our own records show that 6714 Medicare admissions occurred in 1987. This discrepancy reflects multiple admissions of individual beneficiaries. It is impossible to verify the accuracy of the 79 patients who reported by HCFA as dying after discharge. However, it can be noted that our records reflect that of the 79; 4 were readmitted and died in the hospital, 11 died in the Emergency Room, 1 data error where the patient did die while hospitalized, 1 patient was treated in our Emergency Room after HCFA's date of death and 27 patients showed other out patient treatment(s) sometime prior to date of death.

In the 16 diagnostic categories, the hospital's actual mortality rate falls well within the range of the predicted mortality rate. In an effort to cooperate with the publication of this information the Wilkes-Barre General Hospital has provided this commentary to HCFA along with a listing of data which cannot be validated with our own in-hospital statistics. A summary of these errors include: 22 Medical Record Numbers, 10 Medicare numbers, 15 ages, 35 principal diagnoses, 2 discharge dates, 1 death date, and 1 patient with no record of treatment at WBGH. Errors in certain data elements can affect Mortality rates and ranges.

HCFA is most assuredly aware of the shortcomings of the data and methodology, and has committed themselves to work with hospitals to validate data and to investigate more approriate methodologies. The Wilkes-Barre General Hospital, likewise, acknowledges our commitment to public accountability for the quality of care it delivers to its community.

WILLIAMSPORT HOSP

777 RURAL AVE
WILLIAMSPORT, PA 17701

Medicare Hospital Provider Number: 390045

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,409	9	8 - 12	2,563	10	8 - 12
Cancer	73	38	27 - 53	92	38	31 - 55
Cerebrovascular Accidents	82	24	16 - 36	72	36	16 - 39
Gastrointestinal Catastrophes	15	47	13 - 62	9	11	15 - 64
Infectious Disease	19	21	17 - 56	17	47	18 - 64
Metabolic/Electrolyte Disorders	18	39	10 - 56	13	23	4 - 55
Pulmonary Disease	88	15	16 - 34	81	14	15 - 33
Renal Failure	9	33	18 - 81	7	57	17 - 86
Severe Acute Heart Disease	111	32	26 - 46	108	27	28 - 47
Severe Chronic Heart Disease	102	25	13 - 31	93	28	16 - 35
Severe Trauma	4	0	4 - 71	5	0	5 - 65
Gastrointestinal Disease	164	2	1 - 7	188	2	1 - 6
Gynecologic Disease	19	0	0 -100	29	0	0 -100
Low-Risk Heart Disease	273	1	2 - 5	286	3	2 - 7
Musculoskeletal/Skin Conditions	337	2	1 - 6	469	2	1 - 5
Neuropsychiatric/Sensory Disease	92	4	0 - 17	138	5	1 - 11
Urologic Disease	165	1	0 - 6	131	2	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	287
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	164
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	21
Registered Nurses:	249
Licensed Practical Nurses:	65

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

The Williamsport Hospital & Medical Center

RICHARD W. DeWALD
Chairman of the Board

DONALD R. CREAMER
President

777 Rural Avenue Williamsport, PA 17701-3198 • 717/321-1000

Hospital ID: 390045

October 12, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

Please accept this letter as the response of The Williamsport Hospital & Medical Center to the release of selected mortality data for calendar years 1986 and 1987 for Medicare patients treated in our facility.

I was pleased to note that, unlike the data reflected in our report last year, we found no discrepancies of significance in this year's summary.

We do, however, remain concerned that a comparison of mortality data in the abstract without the ability to measure case severity or the patients' predisposition to death upon admission to the Hospital can potentially be misleading, particularly if a comparison is attempted between the mortality rates of one institution to another.

The actual rates of mortality for all diagnostic categories for calendar years 1986 and 1987 fell well within the predicted rates for The Williamsport Hospital & Medical Center. While that is gratifying, it does not reflect the severity of the patients treated as referenced in our case mix index of 1.2084 nor does it take into consideration the fact that our Hospital provides approximately 80% of the advanced life support services in our service area and that we are a regional referral center for cardiovascular disease, pulmonary disease, neurosurgery and treatment of spinal cord trauma and strokes.

Thank you for the opportunity to comment on the proposed data release.

Sincerely,

Donald R. Creamer

Donald R. Creamer
President

WILLS EYE HOSP

4TH WALNUT ST
PHILADELPHIA, PA 19107

Medicare Hospital Provider Number: 390024

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,609	0	1 - 5	1,712	0	1 - 5
Cancer	3	0	6 - 80	2	0	5 - 89
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	1	0	0 - 99	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	1	0	0 - 97
Gastrointestinal Disease	1	0	0 -100	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	13	0	0 - 94	0	-	-
Musculoskeletal/Skin Conditions	21	0	0 - 83	23	0	0 - 28
Neuropsychiatric/Sensory Disease	1,301	0	1 - 4	1,412	0	1 - 4
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	110
Occupancy Rate (%):	38
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	180
Percent of Physicians Who Are Board Certified Specialists:	92
Interns and Residents:	38
Registered Nurses:	89
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

WINDBER HOSPITAL WHEELING CLINIC

600 SOMERSET AVENUE
WINDBER, PA 15963

Medicare Hospital Provider Number: 390112

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	837	14	10 - 16	970	14	11 - 16
Cancer	25	64	28 - 67	44	70	38 - 68
Cerebrovascular Accidents	30	20	11 - 41	29	31	11 - 46
Gastrointestinal Catastrophes	6	50	16 - 83	11	45	21 - 76
Infectious Disease	10	40	11 - 67	18	17	19 - 58
Metabolic/Electrolyte Disorders	22	41	18 - 60	13	46	9 - 62
Pulmonary Disease	40	25	13 - 42	46	26	15 - 43
Renal Failure	0	-	-	2	0	9 - 94
Severe Acute Heart Disease	44	45	25 - 55	42	36	24 - 54
Severe Chronic Heart Disease	54	28	15 - 40	59	24	13 - 36
Severe Trauma	1	0	0 - 98	1	0	1 - 97
Gastrointestinal Disease	66	11	0 - 31	84	2	1 - 11
Gynecologic Disease	8	0	0 -100	14	0	0 -100
Low-Risk Heart Disease	136	1	2 - 7	143	3	1 - 8
Musculoskeletal/Skin Conditions	58	3	0 - 18	66	6	0 - 22
Neuropsychiatric/Sensory Disease	13	0	0 - 68	24	4	0 - 55
Urologic Disease	22	0	0 - 40	37	0	0 - 43

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 98
Occupancy Rate (%): 40
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 26
Percent of Physicians Who Are Board Certified Specialists: 73
Interns and Residents: 0
Registered Nurses: 74
Licensed Practical Nurses: 40

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: Yes

October 21, 1988

Health Standards
and Quality Health Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

RE: Medicare Hospital Mortality Information
for Windber Hospital for Calendar Year 1987

Dear Mrs. Kappert:

Windber Hospital has reviewed the mortality information which is scheduled to be released by HCFA in December 1988 for patients admitted to the Hospital during calendar year 1987. The information which you will be releasing indicates that Windber Hospital does have a Hospice Care Program with the mortality rate for the diagnostic category of cancer. The information to be released by HCFA indicates that there were 25 cases under this diagnostic category with an actual mortality rate of 64%. The actual mortality rate falls within the high side of the predicted range, but it must be stated that these patients are all Hospice patients; and, therefore, there is no active treatment rendered. These individuals are accepted into the program and receive palliative care for the duration of their life expectancies, which average anywhere from two to six months.

I am only forwarding my comments to insure that the statistics as published will be interpreted with the appropriate explanation so as not to skew the information for the uninformed reviewer.

Best personal regards,

Robert A. Chrzan

Robert A. Chrzan
President

gae

YORK HOSPITAL

1001 SOUTH GEORGE ST
YORK, PA 17405

Medicare Hospital Provider Number: 390046

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,605	13	10 - 14	4,864	12	10 - 14
Cancer	193	45	29 - 48	179	41	28 - 48
Cerebrovascular Accidents	201	28	17 - 32	211	24	19 - 33
Gastrointestinal Catastrophes	37	32	20 - 55	37	24	22 - 55
Infectious Disease	40	22	19 - 49	57	28	22 - 51
Metabolic/Electrolyte Disorders	58	36	13 - 43	61	15	12 - 37
Pulmonary Disease	136	32	16 - 35	175	29	17 - 34
Renal Failure	20	35	12 - 66	24	38	12 - 66
Severe Acute Heart Disease	264	39	30 - 46	253	30	30 - 45
Severe Chronic Heart Disease	249	18	16 - 28	251	19	16 - 28
Severe Trauma	9	44	7 - 68	15	47	15 - 66
Gastrointestinal Disease	356	3	1 - 6	349	6	1 - 7
Gynecologic Disease	47	0	0 -100	37	0	0 - 99
Low-Risk Heart Disease	596	4	2 - 6	598	3	2 - 5
Musculoskeletal/Skin Conditions	348	4	1 - 7	473	3	1 - 5
Neuropsychiatric/Sensory Disease	114	3	1 - 10	141	4	1 - 11
Urologic Disease	206	1	0 - 6	194	2	1 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	563
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	404
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	60
Registered Nurses:	565
Licensed Practical Nurses:	212

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

OFFICE OF MEDICAL AFFAIRS

YORK HOSPITAL

A Medical Center That Cares

October 10, 1988

Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

The following constitutes York Hospital's comments relative to the Health Care Financing Administration's Mortality Data Release for 1988. Comments are directed specifically toward hospital characteristics. It is noted that the hospital characteristics provided during the data release to hospitals were to have been derived from the 1986 AHA Survey of Hospitals. Having reviewed York Hospital's survey document, there are inaccuracies between the data which was submitted by York Hospital and the data which appears as hospital characteristics on the HCFA Information Sheet. Specifically, York Hospital's percent of physicians who are board certified for 1986 is 68 percent, not 49 percent. In addition, York Hospital does have a Coronary Care Unit.

At this point, it seems unclear as to whether HCFA will be publishing the 1986 or the 1987 AHA Survey of Hospitals data with the mortality information. Therefore, I would like to take this opportunity to update the 1987 information as well. The 1987 data should reflect a total of 404 physicians on the hospital staff with 66 percent of them being board certified specialists. Again, York Hospital does have an active Coronary Care Unit.

Thank you for the opportunity to comment on this important information.

Sincerely yours,

Pamela Bostic

Pamela A. Bostic
Assistant Administrator

PAB/see

1001 S. GEORGE STREET YORK, PENNSYLVANIA 17405 / TEL (717) 771-2345

ALEXANDRIA HOSPITAL

4320 SEMINARY RD
ALEXANDRIA, VA 22304

Medicare Hospital Provider Number: 490040

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,068	9	9 - 13	1,850	11	9 - 13
Cancer	63	40	25 - 53	80	46	26 - 51
Cerebrovascular Accidents	83	25	17 - 37	54	22	16 - 39
Gastrointestinal Catastrophes	12	17	14 - 61	19	37	15 - 59
Infectious Disease	21	24	20 - 59	14	50	10 - 61
Metabolic/Electrolyte Disorders	52	19	14 - 42	37	14	12 - 40
Pulmonary Disease	80	29	17 - 40	75	21	12 - 34
Renal Failure	8	38	7 - 74	6	83	5 - 74
Severe Acute Heart Disease	67	28	26 - 49	63	30	24 - 48
Severe Chronic Heart Disease	128	13	16 - 30	101	23	15 - 33
Severe Trauma	5	20	5 - 75	4	0	11 - 75
Gastrointestinal Disease	172	2	1 - 7	141	4	1 - 10
Gynecologic Disease	22	0	0 -100	24	0	0 -100
Low-Risk Heart Disease	262	2	2 - 6	222	4	1 - 7
Musculoskeletal/Skin Conditions	173	0	1 - 4	181	3	0 - 9
Neuropsychiatric/Sensory Disease	75	8	0 - 24	38	3	0 - 50
Urologic Disease	81	0	0 - 10	65	0	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	374
Occupancy Rate (%):	72
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	286
Percent of Physicians Who Are Board Certified Specialists:	84
Interns and Residents:	29
Registered Nurses:	427
Licensed Practical Nurses:	43

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

THE ALEXANDRIA HOSPITAL

4320
SEMINARY
ROAD
ALEXANDRIA
VIRGINIA
22304
703 379 3000

October 20, 1988

Mr. William Roper
Health Care Financing Administration
Health Standards & Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, Maryland 21207

Dear Mr. Roper:

Alexandria Hospital is a 414-bed, acute care not-for-profit, full service, community hospital governed by a Board of Directors who serve voluntarily and represent the residents of the community. The Hospital admits over 15,000 patients a year and handles over 65,000 outpatient visits annually. Alexandria Hospital's services include a 24-Hour Emergency Department with a Level II Trauma Center, a Coronary Care Unit, an Oncology Unit, an Intensive Care Unit, a Cardiac Catherization Lab, Interventional Radiology, OB/GYN Services and Psychiatry. In addition to this full range of services the Hospital also provides for community-oriented Family Centered Education Programs, Wellness Classes, a new Birthing Center, Outreach Laboratory Services, Senior Health Care Services, and a Physician Referral and Appointment Service. The Hospital, which serves approximately 325,000 people in Alexandria and surrounding areas, offers care to all regardless of their ability to pay.

Alexandria Hospital does not rely primarily on outside agencies for data to measure the quality of patient care. Regardless of statistics, the Hospital performs internal monitoring through an effective quality assurance plan. During the actual admission process, any breakdown in the standard of care can be corrected at that time, rather than waiting to recognize a problem after discharge. This plan combines the ongoing monitoring of services rendered to the patient with the clinical expertise of the physicians. Thus, a system of comprehensive patient care evaluation is developed which ensures that the caliber of care we provide to our patients maintains the highest standard. The program is subject to the scrutiny of the Board of Directors as well as the Board's Professional Services Committee.

Alexandria Hospital's quality assurance plan meets the requirements of the Joint Commission on the Accreditation of Healthcare Organizations under which the Hospital is fully accredited. A hospital must demonstrate compliance with the pre-established guidelines of Joint Commission to receive this accreditation which signifies that the hospital is functioning well within the accepted standard of care of the healthcare community.

We do appreciate the fact that HCFA has revised its methodology to determine the mortality rate by taking into consideration the severity of illness, as well as by redefining the diagnostic categories. However, certain categories appear to have a limited data base to draw on due to the wide range of predicted mortality (Ex. Gynecological Disease = 0-100% range, Severe Trauma = 5-75% range). We feel that broad ranges such as these invalidate the results.

Furthermore, upon our analysis of the data provided by HCFA, we noted a discrepancy in the hospital characteristics which included the number of beds (actual data is 414 licensed, 358 operational, rather than 248) and number of physicians (658 rather than 282).

Also, under the heading of specialty services, HCFA's data indicated we had shock/trauma or burn units and organ transplant services. Instead we are a Level II Trauma Center and provide organ harvesting only.

We appreciate this opportunity to respond to the proposed release of data. We reiterate our appreciation of HCFA's attempts to take our suggestions from last year's comments into consideration. We continue to believe that HCFA's release of information should take place only after analysis. This release should be in the form of significant information rather than meaningless raw data or statistics that may confuse the public rather than inform them.

Sincerely,

J. Edward Sweet, Jr.

J. Edward Sweet, Jr.
President

ALLEGHENY HOSP
INTERSTATE 64
CLIFTON FORGE, VA 24422

Medicare Hospital Provider Number: 490126

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,653	9	10 - 14	1,712	10	9 - 14
Cancer	29	48	28 - 65	41	54	32 - 65
Cerebrovascular Accidents	65	18	18 - 39	56	16	18 - 39
Gastrointestinal Catastrophes	8	25	8 - 67	14	43	17 - 68
Infectious Disease	17	24	21 - 63	14	36	15 - 64
Metabolic/Electrolyte Disorders	46	26	10 - 41	36	3	13 - 36
Pulmonary Disease	68	21	14 - 36	71	34	16 - 40
Renal Failure	7	29	11 - 78	6	67	18 - 88
Severe Acute Heart Disease	85	33	29 - 51	59	32	29 - 54
Severe Chronic Heart Disease	80	19	15 - 34	61	30	13 - 37
Severe Trauma	3	33	0 - 91	2	0	5 - 89
Gastrointestinal Disease	138	2	1 - 8	131	2	2 - 8
Gynecologic Disease	10	0	0 -100	11	0	0 - 95
Low-Risk Heart Disease	219	1	2 - 6	232	3	2 - 7
Musculoskeletal/Skin Conditions	148	1	1 - 6	146	1	1 - 7
Neuropsychiatric/Sensory Disease	40	2	0 - 27	88	0	1 - 7
Urologic Disease	67	6	0 - 21	65	5	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 214
Occupancy Rate (%): 52
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 40
Percent of Physicians Who Are Board Certified Specialists: 80
Interns and Residents: 0
Registered Nurses: 145
Licensed Practical Nurses: 2

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

ARLINGTON HOSP

1701 N GEORGE MASON DR
ARLINGTON, VA 22304

Medicare Hospital Provider Number: 490050

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,092	11	10 - 14	2,081	12	10 - 14
Cancer	88	39	27 - 52	75	49	31 - 57
Cerebrovascular Accidents	72	19	17 - 37	90	32	16 - 37
Gastrointestinal Catastrophes	12	17	9 - 56	13	54	18 - 70
Infectious Disease	47	43	21 - 52	28	36	19 - 57
Metabolic/Electrolyte Disorders	48	23	15 - 45	47	43	16 - 48
Pulmonary Disease	71	24	17 - 40	69	22	18 - 40
Renal Failure	7	71	15 - 82	4	50	7 - 86
Severe Acute Heart Disease	72	42	29 - 53	84	35	31 - 53
Severe Chronic Heart Disease	84	19	15 - 33	96	25	14 - 33
Severe Trauma	11	27	13 - 66	4	50	2 - 83
Gastrointestinal Disease	131	3	1 - 9	187	3	1 - 8
Gynecologic Disease	19	0	0 -100	19	0	0 -100
Low-Risk Heart Disease	230	5	1 - 8	233	4	1 - 7
Musculoskeletal/Skin Conditions	205	1	1 - 6	210	1	1 - 6
Neuropsychiatric/Sensory Disease	80	2	0 - 14	70	3	1 - 13
Urologic Disease	69	1	0 - 16	66	0	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	365
Occupancy Rate (%):	84
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	277
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	40
Registered Nurses:	318
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

THE ARLINGTON HOSPITAL
1701 NORTH GEORGE MASON DRIVE • ARLINGTON, VIRGINIA 22205 • 703/558-5000

October 14, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Medicare Provider 490050

Dear Dr. Roper,

The Arlington Hospital supports the concept of a well-informed public and appreciates the opportunity to help ensure the accuracy of the data to be released.

Of concern to us is the limited value of counting the number of Medicare deaths and attempting to determine quality from these statistics. These data do not consider such factors as the patient's condition on admission, severity of illness, and whether a patient was transferred from another facility. Mortality review is an integral part of The Arlington Hospital's internal quality assurance program. Each death is reviewed by a group of physicians in the relevant specialty. This is part of the peer review process where review usually confirms that care was appropriate, even though death resulted.

It is important to note that mortality review is only one small part of a much larger quality assurance effort. Included in our comprehensive program are tissue review, surgical case appropriateness monitoring, pharmacy and therapeutics monitoring, medical records evaluation, blood use monitoring, infection surveillance, screening for unexpected clinical occurrences, review of the utilization of hospital ancillary and clinical support services, analysis of and response to surveys, assessments, inspections, etc., by external accreditation licensing, regulatory and reimbursement authorities, surveillance of equipment maintenance programs, and continuing medical health professional education based on demonstrated need.

This type of review covers all services and includes inpatient as well as outpatient care. Information is gathered on an ongoing basis. We systematically draw conclusions from the data gathered, make recommendations, take action and follow up on the success of that action. The results of our quality assurance activity are used in the renewal of medical staff privileges.

Although the Arlington Hospital falls well within the predicted ranges, we would like to make a few clarifications regarding the information to be released. It is important to realize that the diagnostic categories under which patients are classified, do not necessarily reflect the cause of death. Classification is done by principal diagnosis, which is defined by Medicare as the diagnosis which caused the admission. In our hospital for example, of the twenty patients admitted with a diagnosis falling within the Infectious Disease category, nine had cancer, one had AIDS, two had myocardial infarctions and two had renal failure. These diagnoses far better reflect the cause of death.

Consumers should be reminded that the mortality data is for Medicare patients only and does not reflect a hospital's overall mortality rate. The Arlington Hospital's mortality rate for all patients in 1987 was 2.2%.

Small sample size can lead to confusing statistics. In the category of Renal Failure, the 71% mortality rate represents only five patients. Of these five patients, two died after discharge, having been sent home at their request, for terminal care, with a diagnosis of Cancer.

Lack of comprehensive severity indexing greatly limits the usefulness of this data. In the category of Severe Heart Disease each of the thirty people who died had numerous comorbidities. In fact this is the case for the patients in all categories.

In conclusion regarding the use of this data for quality purposes, The Medical Society of Virginia Review Organization regularly reviews a sample of our Medicare cases and in fact reviewed most of the cases in this study. Medical care at Arlington Hospital was found to be appropriate in all these cases. Based on this and the results of our overall quality assurance program, we are confident that the Arlington Hospital provides quality care to our patients.

Sincerely,

John P. Sverha
President

THE ARLINGTON HOSPITAL
1701 NORTH GEORGE MASON DRIVE • ARLINGTON, VIRGINIA 22205 • 703/558-5000

Medicare Provider 490050

Correction to the 1986 AHA Hospital Characteristics:

1. Arlington Hospital's Bed number, derived from 1986 data is listed as 186. This does not include ICU and Special Care beds.

2. The percent of board certified physicians (210 of 252) is 83% not 72%.

3. The AHA survey, from which Hospital Characteristics were taken requested information on interns and residents on the payroll. Although they are not on the payroll per se, Arlington is a teaching hospital with medical students and residents from Georgetown University Medical School in Surgery, Medicine, Gynecology, Orthopedics and Pediatrics.

BATH COUNTY COMM HOSP

DRAWER Z
HOT SPRINGS, VA 24445

Medicare Hospital Provider Number: 490099

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	173	10	10 - 20	186	11	12 - 22
Cancer	3	67	13 - 94	4	100	21 - 84
Cerebrovascular Accidents	4	50	6 - 82	5	20	3 - 74
Gastrointestinal Catastrophes	2	50	8 - 96	1	0	0 - 99
Infectious Disease	3	0	7 - 80	6	17	15 - 76
Metabolic/Electrolyte Disorders	4	25	2 - 81	8	38	5 - 68
Pulmonary Disease	34	9	15 - 38	36	8	12 - 35
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	6	50	10 - 77	12	25	18 - 66
Severe Chronic Heart Disease	7	0	3 - 53	14	7	9 - 44
Severe Trauma	1	0	0 - 99	1	0	0 - 98
Gastrointestinal Disease	16	0	0 - 82	12	0	0 - 96
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	23	4	0 - 44	28	7	0 - 53
Musculoskeletal/Skin Conditions	16	0	0 - 78	10	0	0 - 63
Neuropsychiatric/Sensory Disease	9	0	0 - 98	2	0	0 -100
Urologic Disease	1	0	0 -100	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	25
Occupancy Rate (%):	44
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	7
Percent of Physicians Who Are Board Certified Specialists:	57
Interns and Residents:	0
Registered Nurses:	19
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Bath County Community Hospital
Hot Springs, Virginia

Provider Number: 49-0099

The hospital's comments consisted primarily of annotations to the patient specific information and/or the hospital characteristics generated by the Health Care Financing Administration and provided to the hospital. We did not publish this annotated information.

BEDFORD COUNTY MEMORIAL HOSP

OAKWOOD ST
BEDFORD, VA 24523

Medicare Hospital Provider Number: 490088

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	486	17	10 - 17	503	16	10 - 17
Cancer	14	57	15 - 64	10	60	16 - 72
Cerebrovascular Accidents	30	27	13 - 46	26	35	12 - 49
Gastrointestinal Catastrophes	5	40	5 - 78	1	0	0 - 99
Infectious Disease	3	0	4 - 79	8	50	4 - 69
Metabolic/Electrolyte Disorders	24	25	12 - 51	12	25	10 - 61
Pulmonary Disease	32	28	11 - 44	24	38	12 - 51
Renal Failure	0	-	-	4	50	7 - 86
Severe Acute Heart Disease	24	50	20 - 60	35	23	24 - 53
Severe Chronic Heart Disease	20	30	10 - 50	49	27	10 - 36
Severe Trauma	0	-	-	1	100	0 - 97
Gastrointestinal Disease	46	2	0 - 24	36	3	1 - 21
Gynecologic Disease	5	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	48	6	0 - 33	46	4	0 - 27
Musculoskeletal/Skin Conditions	51	4	0 - 34	43	2	0 - 35
Neuropsychiatric/Sensory Disease	8	0	0 - 99	17	6	0 - 74
Urologic Disease	7	0	0 -100	11	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	156
Occupancy Rate (%):	79
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	50
Licensed Practical Nurses:	43

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Bedford County Memorial Hospital

OAKWOOD STREET POST OFFICE BOX 688 BEDFORD, VIRGINIA 24523 703/586-2441
OFFICE OF THE ADMINISTRATOR

September 22, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building 2-D-2
6325 Security Blvd.
Baltimore, Maryland 21207

RE: Bedford County Memorial Hospital
Hospital ID# 490088

Dear Ms. Kappert:

I am writing in regard to HCFA's recent Medicare Hospital Mortality Information (1987) recently received by this Hospital. We have no comments on the report itself or the mortality percentages, however, we do request two changes be made to the hospital characteristics section. The report states we do not have a coronary care unit in our facility when in fact we do. We have a six (6) bed combination CCU/ICU. The report also states that of our fifteen (15) active staff physicians only 27% are Board certified. This is also incorrect as ten (10) of our fifteen (15) active staff physicians (67%) are Board certified.

We would appreciate HCFA making these two changes to our report before publication.

Sincerely,

John H. Fretz
Administrator

JHF/bp

BLUE RIDGE HOSP DIV/UNIV OF VA

MONTICELLO ROAD
CHARLOTTESVILLE, VA 22901

Medicare Hospital Provider Number: 490125

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	66	3	2 - 14	152	12	6 - 17
Cancer	0	-	-	7	86	14 - 70
Cerebrovascular Accidents	0	-	-	2	0	3 - 88
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	2	0	0 - 92
Pulmonary Disease	1	100	1 - 97	3	33	1 - 87
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	2	50	3 - 92
Severe Chronic Heart Disease	0	-	-	1	0	0 - 98
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	1	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	0	-	-
Musculoskeletal/Skin Conditions	1	0	0 -100	5	20	0 -100
Neuropsychiatric/Sensory Disease	19	0	0 -100	28	0	0 - 30
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	222
Ownership/Control:	State Government

STAFFING

Interns and Residents:	20
Registered Nurses:	75
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

BUCHANAN GENERAL HOSP

ROUTE 5 BOX 20
GRUNDY, VA 24614

Medicare Hospital Provider Number: 490127

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	968	7	8 - 13	1,163	7	7 - 12
Cancer	14	71	31 - 78	15	73	28 - 72
Cerebrovascular Accidents	24	21	14 - 48	25	24	14 - 49
Gastrointestinal Catastrophes	1	0	0 - 97	4	0	8 - 73
Infectious Disease	7	29	8 - 71	2	0	4 - 88
Metabolic/Electrolyte Disorders	33	21	8 - 42	40	13	14 - 42
Pulmonary Disease	107	12	15 - 31	83	13	15 - 34
Renal Failure	1	100	1 -100	2	50	5 - 94
Severe Acute Heart Disease	32	41	22 - 56	38	45	21 - 53
Severe Chronic Heart Disease	25	12	11 - 39	30	20	8 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	59	0	0 - 10	121	2	1 - 9
Gynecologic Disease	4	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	256	3	2 - 7	259	1	1 - 5
Musculoskeletal/Skin Conditions	49	2	1 - 15	69	0	0 - 9
Neuropsychiatric/Sensory Disease	17	6	0 -100	27	0	0 - 70
Urologic Disease	43	0	0 - 64	40	0	0 - 26

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	194
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	76
Licensed Practical Nurses:	99

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

CENTRAL VIRGINIA TRNG CNTR MS

PO BOX 1098
LYNCHBURG, VA 24504

Medicare Hospital Provider Number: 490108

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	171	2	3 - 9	154	5	3 - 11
Cancer	1	100	3 - 99	0	-	-
Cerebrovascular Accidents	1	0	1 - 97	0	-	-
Gastrointestinal Catastrophes	1	100	2 - 98	0	-	-
Infectious Disease	1	0	0 -100	2	0	1 - 89
Metabolic/Electrolyte Disorders	5	0	1 - 71	3	0	0 -100
Pulmonary Disease	31	3	4 - 25	19	21	4 - 46
Renal Failure	0	-	-	2	100	8 - 92
Severe Acute Heart Disease	1	100	0 - 98	1	0	0 - 99
Severe Chronic Heart Disease	0	-	-	1	0	0 - 99
Severe Trauma	0	-	-	1	0	0 - 99
Gastrointestinal Disease	9	0	0 - 94	10	0	0 -100
Gynecologic Disease	7	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	6	0	0 -100	7	0	0 -100
Musculoskeletal/Skin Conditions	29	0	0 - 89	23	0	0 - 70
Neuropsychiatric/Sensory Disease	7	0	0 -100	7	0	0 -100
Urologic Disease	2	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	46
Ownership/Control:	State Government

STAFFING

Interns and Residents:	0
Registered Nurses:	32
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

COMMONWEALTH of VIRGINIA

DEPARTMENT OF
MENTAL HEALTH AND MENTAL RETARDATION

CENTRAL VIRGINIA TRAINING CENTER

B. R. WALKER, Ph.D.
Director

David K. Pechmann, M.H.A.
Associate Director

P. O. BOX 1098
LYNCHBURG, VIRGINIA 24505
(804) 528-6000

October 18, 1988

Health Standards and Quality Bureau, HCFA
ATTENTION: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Medicaid/Medicare 49-0108
Central Virginia Training
Center - Acute Care

Dear Mrs. Kappert:

My staff has reviewed the mortality information about the Medicare patients whose last discharge from our Acute Hospital was in 1987. I am listing below the discrepancies noted in your report:

REGISTER NUMBER	**AREA OF DISCREPANCY**
[redacted]	Incorrect Medical Record Number
[redacted]	Incorrect Admission Date
[redacted]	Incorrect Admission Code
[redacted]	
[redacted]	Incorrect Dates of Death

*All of the deaths recorded within 30 days of discharge were correct. There were six deaths over 30 days after discharge and five of these were incorrect.

Under the section on Hospital Characteristics we do not have any of the Specialty Services listed. Our Intensive Care Unit does provide coronary care, however, there is no unit specifically designated as "Coronary Care". There are 24 beds assigned to our hospital and we have staffing on a 24-hour basis as follows: RN's 28, LPN's 9.

I hope that our contribution will assist you in completing the information necessary for the final publication.

If you have additional questions, please feel free to contact me.

Sincerely yours,

B. R. Walker, Ph.D.
Director

CSV/pkt

CC: Jennifer G.Fidura,
Deputy Commissioner DMHMRSA

CHESAPEAKE GEN HOSP

736 BATTLEFIELD BLVD N
CHESAPEAKE, VA 23320

Medicare Hospital Provider Number: 490120

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,823	13	9 - 14	1,696	15	10 - 15
Cancer	59	51	29 - 57	51	41	26 - 55
Cerebrovascular Accidents	74	22	15 - 35	60	33	16 - 41
Gastrointestinal Catastrophes	19	32	9 - 54	17	29	12 - 57
Infectious Disease	49	41	22 - 53	61	39	24 - 53
Metabolic/Electrolyte Disorders	43	30	10 - 43	22	36	9 - 51
Pulmonary Disease	89	24	15 - 35	100	42	16 - 38
Renal Failure	8	88	9 - 69	8	38	9 - 77
Severe Acute Heart Disease	55	38	24 - 51	66	42	26 - 51
Severe Chronic Heart Disease	96	22	13 - 31	76	26	12 - 34
Severe Trauma	3	0	3 - 80	2	0	1 - 90
Gastrointestinal Disease	115	5	1 - 13	115	5	0 - 14
Gynecologic Disease	13	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	181	4	1 - 9	192	4	1 - 8
Musculoskeletal/Skin Conditions	182	2	1 - 7	166	1	0 - 6
Neuropsychiatric/Sensory Disease	94	2	1 - 11	79	4	0 - 25
Urologic Disease	59	3	0 - 35	50	0	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	210
Occupancy Rate (%):	82
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	190
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	298
Licensed Practical Nurses:	42

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CHESAPEAKE
GENERAL HOSPITAL

October 17, 1988

Medicare Provider
#490120

Health Standard and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

Thank you for the opportunity to provide comments on the HCFA 1987 Medicare Mortality Data relevant to our hospital.

Chesapeake General Hospital is a 210 bed acute care facility. In verifying the hospital characteristic data, I noticed that the HCFA data stated that 47% of the Medical Staff was Board certified. In fact, information submitted for the 1986 AHA survey indicated that 60% of the Medical Staff were Board certified.

It is important to note that, while HCFA data is adjusted for some variables, adjustments have not been made to account for all elements involved in severity of illness considerations. This concern regarding validity of the data has been voiced by many authorities, including the Administrator of HCFA and Dr. Dennis O'Leary, President of the Joint Commission on Accreditation of Healthcare Organizations. Also, this data release ONLY relates to Medicare patients and does not reflect hospitals' overall mortality rates.

Our hospital is flanked by several nursing homes, which refer many of their very elderly and debilitated patients to us when they develop acute problems. In addition, in some cases (as with patients in Renal Failure), patients may be terminally ill when they are admitted to the hospital. Categories of cases with a small number of patients may have mortality rates that are not valid, from a statistical standpoint.

Chesapeake General Hospital has a JCAHO approved hospital-wide, systematic, ongoing Quality Appraisal program. All Medical Staff and hospital departments and committees involved with the provision of patient care participate in these activities. Mortality review is one part of this process.

Since quality of care is always of utmost concern, patient-related data received is incorporated into the hospital's Quality Appraisal program. Any potential problem areas are evaluated and prompt corrective action is taken, if concerns are identified.

Sincerely,

Donald Buckley

Donald S. Buckley, FACHE
President-Administrator

CHIPPENHAM HOSP

7101 JAHNKE ROAD
RICHMOND, VA 23225

Medicare Hospital Provider Number: 490112

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,687	9	8 - 12	2,616	10	8 - 13
Cancer	53	47	26 - 55	61	36	28 - 55
Cerebrovascular Accidents	80	34	16 - 38	94	32	17 - 38
Gastrointestinal Catastrophes	21	24	15 - 55	20	35	16 - 60
Infectious Disease	18	33	19 - 62	35	31	18 - 53
Metabolic/Electrolyte Disorders	56	18	12 - 39	62	21	11 - 38
Pulmonary Disease	105	18	17 - 35	104	18	14 - 32
Renal Failure	9	56	16 - 81	13	62	18 - 78
Severe Acute Heart Disease	109	28	26 - 46	109	34	27 - 47
Severe Chronic Heart Disease	119	25	15 - 32	122	25	16 - 33
Severe Trauma	3	33	2 - 86	5	40	4 - 78
Gastrointestinal Disease	184	1	1 - 6	150	3	0 - 10
Gynecologic Disease	25	0	0 -100	22	0	0 -100
Low-Risk Heart Disease	484	2	2 - 5	467	3	2 - 6
Musculoskeletal/Skin Conditions	238	2	1 - 6	248	1	1 - 5
Neuropsychiatric/Sensory Disease	75	7	0 - 20	74	4	0 - 19
Urologic Disease	117	2	0 - 9	117	2	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	470
Occupancy Rate (%):	66
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	286
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	12
Registered Nurses:	321
Licensed Practical Nurses:	68

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HCA Chippenham
Hospital

October 24, 1988

Ms. Sandra Cappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Re: Medicare Provider #490112

Dear Mrs. Cappert:

We have reviewed the Mortality Report published by the Health Care Financing Administration of the Department of Health and Human Services and found that Chippenham Hospital's actual mortality rate is within the predicted mortality range for all diagnostic categories. In fact, Chippenham is on the low end of the range for many of the categories. This is particularly impressive when viewed with the fact that Chippenham is a 470 bed full-service acute care facility which treats many complicated and complex cases. At Chippenham Hospital we are, and will continue to be, committed to the delivery of high quality patient care.

If you have any questions regarding this, please do not hesitate to contact me.

Sincerely,

M. L. Lagarde
Chief Operating Officer

MLL/dln

COMM HOSP OF ROANOKE VALLEY

101 ELM ST SE
ROANOKE, VA 24029

Medicare Hospital Provider Number: 490100

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,494	11	9 - 13	2,590	11	9 - 13
Cancer	103	42	30 - 54	95	44	30 - 54
Cerebrovascular Accidents	88	20	20 - 38	84	25	20 - 40
Gastrointestinal Catastrophes	11	36	11 - 65	13	15	13 - 57
Infectious Disease	6	17	10 - 72	11	36	19 - 72
Metabolic/Electrolyte Disorders	33	30	11 - 46	55	31	16 - 46
Pulmonary Disease	114	31	16 - 35	126	22	15 - 33
Renal Failure	9	22	12 - 74	12	42	17 - 78
Severe Acute Heart Disease	77	44	26 - 50	98	38	28 - 49
Severe Chronic Heart Disease	134	28	16 - 33	107	24	16 - 34
Severe Trauma	6	0	5 - 59	4	25	2 - 81
Gastrointestinal Disease	258	2	2 - 6	219	3	1 - 7
Gynecologic Disease	37	0	0 -100	36	0	0 -100
Low-Risk Heart Disease	256	4	2 - 7	297	2	1 - 6
Musculoskeletal/Skin Conditions	254	1	1 - 5	246	2	1 - 6
Neuropsychiatric/Sensory Disease	56	0	1 - 10	97	2	0 - 13
Urologic Disease	122	2	0 - 9	116	2	1 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	315
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	166
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	2
Registered Nurses:	227
Licensed Practical Nurses:	79

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

COMMUNITY MEMORIAL HOSP

125 BUENA VISTA CIRCLE
SOUTH HILL , VA 23970

Medicare Hospital Provider Number: 490098

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,003	13	11 - 17	982	13	10 - 15
Cancer	22	50	24 - 65	14	71	20 - 67
Cerebrovascular Accidents	64	23	17 - 39	67	22	17 - 39
Gastrointestinal Catastrophes	5	20	9 - 77	4	50	10 - 86
Infectious Disease	13	15	15 - 58	9	11	15 - 64
Metabolic/Electrolyte Disorders	19	37	13 - 58	20	25	11 - 52
Pulmonary Disease	52	27	15 - 42	47	34	13 - 42
Renal Failure	5	0	12 - 75	7	57	13 - 83
Severe Acute Heart Disease	70	34	26 - 50	62	35	26 - 52
Severe Chronic Heart Disease	75	28	13 - 34	56	27	11 - 35
Severe Trauma	2	0	2 - 88	2	0	3 - 88
Gastrointestinal Disease	62	5	0 - 19	70	3	1 - 14
Gynecologic Disease	8	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	151	4	2 - 9	155	4	1 - 9
Musculoskeletal/Skin Conditions	60	3	1 - 16	80	2	0 - 15
Neuropsychiatric/Sensory Disease	23	4	0 - 83	32	3	0 - 59
Urologic Disease	49	0	0 - 17	36	3	0 - 52

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	260
Occupancy Rate (%):	75
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	25
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	53
Licensed Practical Nurses:	58

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CULPEPER MEM HOSP INC

501 SUNSET LANE
CULPEPER, VA 22701

Medicare Hospital Provider Number: 490019

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	734	12	9 - 15	750	12	9 - 15
Cancer	16	31	25 - 70	20	70	20 - 61
Cerebrovascular Accidents	29	34	14 - 48	22	23	12 - 48
Gastrointestinal Catastrophes	4	50	3 - 82	5	20	2 - 75
Infectious Disease	15	13	15 - 55	16	19	13 - 55
Metabolic/Electrolyte Disorders	31	19	8 - 42	15	40	3 - 57
Pulmonary Disease	56	20	15 - 38	49	24	12 - 39
Renal Failure	4	50	10 - 88	3	33	9 - 91
Severe Acute Heart Disease	19	42	20 - 63	45	27	26 - 54
Severe Chronic Heart Disease	37	19	11 - 38	34	21	11 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	66	2	1 - 12	50	6	0 - 30
Gynecologic Disease	6	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	62	5	1 - 16	54	2	0 - 17
Musculoskeletal/Skin Conditions	81	2	0 - 13	86	2	0 - 14
Neuropsychiatric/Sensory Disease	21	5	0 - 54	37	3	0 - 52
Urologic Disease	21	0	0 - 95	24	0	0 - 54

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	84
Occupancy Rate (%):	54
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	55
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	61
Licensed Practical Nurses:	33

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

DEPAUL HOSP

150 KINGSLEY AVE
NORFOLK, VA 23505

Medicare Hospital Provider Number: 490011

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,532	11	9 - 13	2,595	11	9 - 13
Cancer	115	41	30 - 52	120	32	29 - 51
Cerebrovascular Accidents	85	19	16 - 34	111	25	17 - 35
Gastrointestinal Catastrophes	26	38	20 - 60	26	31	16 - 55
Infectious Disease	18	28	11 - 54	11	36	17 - 71
Metabolic/Electrolyte Disorders	51	29	14 - 44	57	21	10 - 38
Pulmonary Disease	116	18	15 - 32	110	25	13 - 33
Renal Failure	8	25	6 - 72	8	25	9 - 74
Severe Acute Heart Disease	85	36	25 - 48	99	42	26 - 47
Severe Chronic Heart Disease	125	17	14 - 29	95	18	13 - 30
Severe Trauma	10	20	13 - 65	7	43	11 - 76
Gastrointestinal Disease	195	3	1 - 7	203	2	1 - 7
Gynecologic Disease	29	0	0 - 97	23	0	0 -100
Low-Risk Heart Disease	260	5	1 - 8	270	5	1 - 7
Musculoskeletal/Skin Conditions	169	2	0 - 8	194	3	0 - 8
Neuropsychiatric/Sensory Disease	128	2	1 - 9	154	2	0 - 9
Urologic Disease	104	0	0 - 7	88	1	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	361
Occupancy Rate (%):	70
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	240
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

490011

DePaul Hospital

150 Kingsley Lane
Norfolk, Virginia 23505
[illegible]

October 24, 1988

William Roper, M.D.
Administrator
Department of Health and Human Services
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Blvd.
Baltimore, MD 21207

Dear Dr. Roper:

Enclosed is DePaul Medical Center's (490011) response to the HCFA mortality statistics. We appreciate the chance to respond to this very interesting review. It is hoped that the comments on our preliminary review will be of benefit to a continued improvement of the process.

Sincerely,

Harold M. Horden

Harold M. Horden, M.D.
Vice-President, Medical Affairs

HMH/fg

Comments on the HCFA Mortality Data
DePaul Medical Center, Norfolk, Virginia
October 24, 1988

The HCFA Mortality Data has been reviewed and verification and evaluation of that data has begun. The statistics will serve as a component of the Hospital's ongoing quality management process. As one of the many internal monitors the Hospital uses to flag charts for the more detailed and specific peer review process, the HCFA data serves as a second check to the process. It is important to point out that our mortality rate, as with any of the other Hospital specific rates utilized, serves only as a flag for review of the actual care given, and not an indication of quality or disquality. The Joint Commission, The American Hospital Association, other professional organizations, hospitals and hospital systems as well as HCFA, are invested in continued research, trying to identify ways to give the public better assurance of the quality of care provided in health care facilities today. We can expect to see the methodology change as we develop better yardsticks to measure the quality of care we render, taking into consideration such important factors as severity of illness and other qualifying factors in the evaluation of that care. In our present quality management program, we review all inhouse records for a number of unexpected outcomes, one of which is death. Any records in that category in which there is any question goes on for physician review. Concerns, questions or breeches of the standard of care would go on to the department for final review and would be reported back to the Quality Assurance Activities Committee of the Medical Staff. All the charts within the HCFA data were included within that process.

Verification Data/HCFA Mortality Statistics/1987

The HCFA data indicates that a total of 2,532 medicare patients were seen. Our records demonstrates a total medicare population of 4,109 patients for 1987. It is presumed that this discrepancy reflects multiple admissions of our medicare population which is not reflected in HCFA data. The HCFA statistics reflect only the last admission for the year in the total.

The HCFA data indicates that a total of 277 patients died within 30 days of admission, 230 while still in the hospital and 47 post discharge. Our records indicate the one patient [redacted] that HCFA reported as dying "inhouse", was discharged alive. The patient's status after discharge is not verifiable. Otherwise, all "inhouse" deaths have been verified. The Hospital has no way to verify "out of hospital" deaths.

Interpretation of HCFA Data

The hospital's actual mortality rate did not fall outside the range of the predicted rates in any of the categories. An evaluation of sixteen (16) categories of data has been initiated.

DICKERSON COUNTY MED CNTR

HOSPITAL DR PO BOX 1390
CLINTWOOD, VA 24228

Medicare Hospital Provider Number: 490131

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	256	12	9 - 18	44	0	6 - 16
Cancer	4	25	13 - 86	0	-	-
Cerebrovascular Accidents	12	33	6 - 59	0	-	-
Gastrointestinal Catastrophes	2	100	6 - 90	0	-	-
Infectious Disease	2	0	6 - 89	3	0	7 - 81
Metabolic/Electrolyte Disorders	2	0	1 - 90	0	-	-
Pulmonary Disease	26	46	17 - 55	7	0	5 - 52
Renal Failure	1	100	3 - 98	0	-	-
Severe Acute Heart Disease	12	17	17 - 62	1	0	0 - 98
Severe Chronic Heart Disease	8	38	5 - 67	3	0	0 - 90
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	27	0	0 - 34	6	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	41	2	0 - 25	3	0	0 -100
Musculoskeletal/Skin Conditions	18	0	0 - 83	5	0	0 -100
Neuropsychiatric/Sensory Disease	15	0	0 - 99	1	0	0 -100
Urologic Disease	4	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	50
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	22
Licensed Practical Nurses:	21

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

EASTERN STATE HOSP

DRAWER A
WILLIAMSBURG, VA 23185

Medicare Hospital Provider Number: 490109

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	118	10	10 - 21	135	13	9 - 21
Cancer	2	100	10 - 94	0	-	-
Cerebrovascular Accidents	1	0	0 - 98	5	80	7 - 75
Gastrointestinal Catastrophes	1	0	0 -100	0	-	-
Infectious Disease	1	100	0 - 99	0	-	-
Metabolic/Electrolyte Disorders	12	0	4 - 40	10	20	3 - 60
Pulmonary Disease	23	17	17 - 50	38	13	12 - 37
Renal Failure	0	-	-	1	100	1 - 97
Severe Acute Heart Disease	1	100	3 - 98	1	100	3 - 98
Severe Chronic Heart Disease	4	25	1 - 83	4	25	7 - 81
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	2	0	0 -100	2	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	5	0	0 -100	8	13	0 - 98
Musculoskeletal/Skin Conditions	2	50	0 -100	4	0	0 -100
Neuropsychiatric/Sensory Disease	2	0	0 -100	8	0	0 -100
Urologic Disease	1	0	0 -100	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	50
Ownership/Control:	State Government

STAFFING

Interns and Residents:	0
Registered Nurses:	8
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

FAIR OAKS HOSP

3600 JOSEPH DIEWICK DR
FAIRFAX, VA 22033

Medicare Hospital Provider Number: 490101

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	708	11	8 - 13	886	13	8 - 14
Cancer	19	53	21 - 65	13	38	17 - 68
Cerebrovascular Accidents	29	14	14 - 42	43	16	14 - 38
Gastrointestinal Catastrophes	5	40	6 - 78	8	38	8 - 70
Infectious Disease	4	25	6 - 81	9	44	7 - 67
Metabolic/Electrolyte Disorders	9	33	5 - 65	9	44	9 - 69
Pulmonary Disease	42	14	14 - 38	35	29	10 - 42
Renal Failure	1	0	2 - 98	2	50	3 - 93
Severe Acute Heart Disease	19	32	16 - 58	43	56	29 - 59
Severe Chronic Heart Disease	36	31	12 - 43	39	23	10 - 38
Severe Trauma	1	100	1 - 97	1	0	0 - 98
Gastrointestinal Disease	54	6	0 - 33	64	2	0 - 15
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	84	4	1 - 13	113	4	0 - 12
Musculoskeletal/Skin Conditions	94	1	0 - 10	101	2	0 - 11
Neuropsychiatric/Sensory Disease	33	0	0 - 26	49	2	0 - 53
Urologic Disease	30	0	0 - 79	36	0	0 - 28

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	160
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

FAIRFAX HOSPITAL SYSTEM
[illegible] OF INOVA HEALTH SYSTEMS

8001 Braddock Road
Springfield, Virginia 22151
703 321-4213

C. Michael French
President

October 20, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Mrs. Sandra Kappert

Dear Mrs. Kappert:

As President of Fairfax Hospital System (FHS), and Chairman of the FHS Medical Affairs Council, we applaud the efforts of your organization to provide meaningful and accurate information about the nation's health care. Your work complements and supports our efforts to provide high quality care for all members of our community.

We are pleased that, once again this year, the mortality rates at each of our four hospitals fall into the ranges predicted by your statistical model. Although the data by themselves do not measure the quality of care provided by an individual hospital, they can certainly play a role in the continuing quality assurance program of each FHS hospital.

Several changes, such as new groupings of diseases in individual categories, should make this year's mortality data more meaningful. Nevertheless, as your agency has pointed out, additional refinements are still required--especially to account for severity of illness at specific hospitals.

The enclosed comments from Fair Oaks, Fairfax, Jefferson, and Mount Vernon hospitals seek to provide the appropriate context in which to evaluate the 1987 mortality data.

We appreciate the opportunity to comment on these data.

Sincerely yours,

C. Michael French
President and
Chief Executive Officer

Ira S. Young MD

Ira S. Young, M.D.
Chairman,
Medical Affairs Council

FAIR OAKS HOSPITAL
FAIRFAX HOSPITAL SYSTEM

Fair Oaks Hospital
3600 Joseph Siewick Drive
Fairfax, Virginia 22033
703 391-3600

Steven E. Brown
Vice President, Fairfax Hospital System
Administrator, Fair Oaks Hospital

Hospital I.D. #490101

October 19, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: 1987 HCFA Mortality Data
#490101

ATTN: Mrs. Sandra Kappert

Dear Mrs. Kappert:

On behalf of Fair Oaks Hospital, an affiliate of Fairfax Hospital System, we commend HCFA for taking on the challenge of issuing mortality data for the nation's hospitals. As a provider of quality medical care, Fair Oaks Hospital supports responsible efforts to make available useful and meaningful data describing health care providers.

Fair Oaks Hospital is pleased that its overall mortality rate for all causes is within HCFA's predicted range.

The HCFA mortality data is one measure that can help measure quality, however, this methodology has limitations, as acknowledged by HCFA itself. Therefore, several points should be identified to support responsible use of the information.

DATA VERIFICATION - All deaths listed by HCFA have been verified with the exception of one patient's date of discharge which was incorrect. (See attachment A)

DATA INTERPRETATION - The Medicare patients who died at the Hospital were all severely ill at the time of their admission. Over 94% of the total patients were either emergent or urgent admissions. The remaining 6% were either terminal on admission or had several comorbid conditions.

In the category of severe trauma, the one Medicare trauma patient who died was [redacted]

In the category of Cancer, Fair Oaks Hospital's rate of 53% was well within the predicted range of 21 - 65%. There were 10 deaths reported. Of these:

- Seventy percent (70%) were described as "terminal" or with advanced metastatic disease. All 10 cases had at least two comorbid conditions at the time of admission.
- The remaining 30% died after discharge to a nursing home or home with home health care services. Review of these cases indicated these discharges to be appropriate.

In the category of Severe Chronic Heart Disease, Fair Oaks Hospital's rate of 31% was again well within the predicted range of 12 - 43%. There were 5 deaths reported. Of these:

- [redacted]
- The average age for this category was 76.4.

Fair Oaks Hospital routinely analyzes the quality of care provided for all patients, including physician review of all deaths. The Hospital took the opportunity presented by the HCFA information disclosure to further analyze the medical records of the Medicare patients who died. This investigation found no evidence of any systematic reasons for the deaths of these patients other than their being severely ill at the time of their admission to the Hospital. Thank you for the opportunity to comment on the data.

Sincerely,

Steven E. B

Steven E. Brown
Vice President/Administrator

Tibor J. Ham, Jr., M.D.
President
Fair Oaks Hospital Medical Staff

/csw

Attachments

FAIRFAX HOSP

3300 GALLOWS RD
FALLS CHURCH, VA 22046

Medicare Hospital Provider Number: 490063

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,655	10	9 - 13	3,430	11	9 - 13
Cancer	154	40	31 - 51	152	36	29 - 49
Cerebrovascular Accidents	128	24	17 - 33	115	29	18 - 36
Gastrointestinal Catastrophes	24	29	18 - 58	24	21	16 - 53
Infectious Disease	34	29	19 - 52	24	25	21 - 58
Metabolic/Electrolyte Disorders	51	25	13 - 43	43	19	11 - 40
Pulmonary Disease	115	21	17 - 35	103	28	16 - 37
Renal Failure	9	22	9 - 71	13	8	14 - 66
Severe Acute Heart Disease	153	31	28 - 46	106	39	29 - 50
Severe Chronic Heart Disease	126	22	15 - 31	140	25	16 - 33
Severe Trauma	13	8	11 - 51	14	21	12 - 59
Gastrointestinal Disease	235	1	1 - 6	243	2	1 - 6
Gynecologic Disease	39	0	0 -100	35	0	0 -100
Low-Risk Heart Disease	699	2	2 - 5	610	4	2 - 6
Musculoskeletal/Skin Conditions	299	2	1 - 6	302	4	1 - 7
Neuropsychiatric/Sensory Disease	158	4	1 - 10	161	2	0 - 8
Urologic Disease	128	1	0 - 9	105	0	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	644
Occupancy Rate (%):	94
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	1,024
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	52
Registered Nurses:	909
Licensed Practical Nurses:	84

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

FAIRFAX HOSPITAL
FAIRFAX HOSPITAL SYSTEM

Fairfax Hospital
3300 Gallows Road
Falls Church, Virginia 22046
703 698-1110

Everett M. Devaney
Vice President, Fairfax Hospital System
Administrator, Fairfax Hospital

October 14, 1988

Hospital I.D. #490063

Health Care Financing Administration
Health Standards and Quality Bureau
6325 Security Boulevard
202 Meadows East Building
Baltimore, MD 21207

Attention: Mrs. Sandra Kappert

Dear Ms. Kappert:

On behalf of Fairfax Hospital, an affiliate of the Fairfax Hospital System, we thank you for the opportunity to provide comments to help the public interpret our mortality statistics. These comments are essential to understanding the data since statistical methods for predicting mortality alone are not yet sophisticated enough to be valid and reliable indicators of quality. HCFA's efforts this year have provided an improvement over last year's methodology and we support these continuing efforts to provide meaningful information.

The hospital's active quality assurance program collects and analyzes patient care data on a daily basis. Deaths are routinely reviewed for appropriateness of care as part of this program and important aspects of care of all patients are routinely monitored and evaluated.

Fairfax Hospital is a 656 bed full service hospital. All general medical and surgical services are offered. In addition, the hospital offers a wide scope of specialty care including open heart surgery, heart transplantation, oncology, trauma care, obstetrics, and neonatal intensive care. Because we are a tertiary referral and teaching center, a large portion of our patients are more severely ill than patients typically found in general community hospitals.

The Hospital is pleased that given this complex mix of services and patients, actual mortality rates are well within predicted mortality ranges in all 16 diagnostic categories and overall.

Data Interpretation

As part of its review the Hospital did an in depth analysis of mortalities in two of the diagnostic categories where the hospital is a major referral center. The results of that review follow.

Cancer

- Of the 78 patient mortalities, 44% were emergency admissions to the Hospital; another 8% were transferred in from another health care facility.
- The average age of these patients was 73.4 years.

- About 40% of these patients had had multiple admissions to a hospital in 1987.

Severe Acute Heart Disease

- Of the 48 patient mortalities, 83% presented at the emergency department. Another 8% were transferred in from another hospital.
- Over half of the patients who died experienced a cardio-pulmonary arrest in the hospital.
- Patients were, on average, 66.5 years old.

III. Data Verification

Accuracy of data for 1987 has improved over the 1986 study.

Hospital demographic information from the 1986 AHA guide is incorrect. Corrected information is provided below.

GENERAL

Beds (#):	656
Occupancy Rate (%)	89%
Ownership/Control	Private, non-profit

STAFFING

Total Number of Physicians	1355
Percent Board Certified	60% estimate
Interns and Residents Per Bed	.09
Registered Nurses Per Bed	1.72
Licensed Practical Nurse Per Bed	.11

SPECIALTY SERVICES

Shock/Trauma OR Burn Unit	Yes
Coronary Care Unit	Yes
Organ Transplant Service	Yes
Hospice Care	No

Again, thank you for this opportunity for input. We look forward to working with you in future years as the predictive methodologies and data improves.

Sincerely,

EM Devaney　　John P. Mamana

Everett M. Devaney
Vice President/Administrator

John P. Mamana
President, Medical Staff

EMD:JPM:lmd

FRANKLIN MEMORIAL HOSP

124 FLOYD AVE
ROCKY MOUNT, VA 24151

Medicare Hospital Provider Number: 490089

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	476	14	9 - 16	489	13	10 - 17
Cancer	2	50	5 - 93	6	33	14 - 80
Cerebrovascular Accidents	18	33	10 - 53	20	40	11 - 53
Gastrointestinal Catastrophes	5	0	7 - 65	1	0	0 - 99
Infectious Disease	8	38	10 - 71	7	57	12 - 76
Metabolic/Electrolyte Disorders	7	29	9 - 71	14	21	6 - 53
Pulmonary Disease	61	31	14 - 39	51	14	14 - 36
Renal Failure	2	100	6 - 90	1	100	3 - 98
Severe Acute Heart Disease	20	55	18 - 60	27	30	22 - 57
Severe Chronic Heart Disease	27	15	12 - 41	25	20	9 - 42
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	31	0	0 - 29	38	3	0 - 54
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	71	6	0 - 19	63	3	1 - 15
Musculoskeletal/Skin Conditions	17	6	0 - 90	22	14	0 - 66
Neuropsychiatric/Sensory Disease	10	10	0 - 99	10	0	0 -100
Urologic Disease	14	0	0 - 98	10	10	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	50
Occupancy Rate (%):	44
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GILES MEMORIAL HOSPITAL

235 SOUTH BUCHANAN STREET
PEARISBURG, VA 24134

Medicare Hospital Provider Number: 490085

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	434	12	8 - 15	429	13	9 - 16
Cancer	4	50	3 - 82	5	60	10 - 81
Cerebrovascular Accidents	13	23	9 - 56	18	33	12 - 55
Gastrointestinal Catastrophes	3	100	2 - 80	2	100	5 - 89
Infectious Disease	13	31	9 - 59	8	38	10 - 71
Metabolic/Electrolyte Disorders	2	50	2 - 92	9	44	5 - 67
Pulmonary Disease	37	30	17 - 48	33	18	11 - 40
Renal Failure	1	0	2 - 98	0	-	-
Severe Acute Heart Disease	16	44	17 - 63	18	39	17 - 60
Severe Chronic Heart Disease	21	14	10 - 42	34	21	12 - 40
Severe Trauma	1	0	2 - 97	0	-	-
Gastrointestinal Disease	56	0	1 - 10	37	3	0 - 39
Gynecologic Disease	2	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	70	3	1 - 14	59	3	0 - 18
Musculoskeletal/Skin Conditions	24	0	0 - 25	23	4	1 - 35
Neuropsychiatric/Sensory Disease	9	22	0 -100	10	0	0 - 99
Urologic Disease	10	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	30
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	19
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	0
Registered Nurses:	37
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GILL MEMORIAL EYE EAR NOSE THROAT

711 S JEFFERSON ST
ROANOKE, VA 24011

Medicare Hospital Provider Number: 490083

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	53	0	1 - 11	118	1	1 - 8
Cancer	2	0	1 - 90	1	0	0 - 98
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	1	0	0 -100	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	0	-	-
Musculoskeletal/Skin Conditions	1	0	0 -100	3	0	0 -100
Neuropsychiatric/Sensory Disease	29	0	0 - 69	76	1	0 - 17
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	12
Occupancy Rate (%):	17
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	16
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GREENSVILLE MEM HOSPITAL

214 WEAVER AVE
EMPORIA, VA 23847

Medicare Hospital Provider Number: 490097

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	983	15	12 - 17	906	14	11 - 17
Cancer	34	71	28 - 61	20	65	24 - 66
Cerebrovascular Accidents	44	23	17 - 43	54	30	16 - 42
Gastrointestinal Catastrophes	7	43	9 - 73	8	25	8 - 67
Infectious Disease	19	47	15 - 60	24	33	16 - 56
Metabolic/Electrolyte Disorders	47	13	9 - 36	29	17	10 - 43
Pulmonary Disease	86	24	16 - 37	84	19	17 - 37
Renal Failure	10	70	19 - 81	7	43	13 - 82
Severe Acute Heart Disease	72	31	27 - 50	46	33	22 - 50
Severe Chronic Heart Disease	44	27	12 - 39	38	24	13 - 42
Severe Trauma	1	0	0 - 99	1	100	1 - 97
Gastrointestinal Disease	58	0	1 - 9	61	0	1 - 9
Gynecologic Disease	1	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	132	3	1 - 9	143	2	1 - 8
Musculoskeletal/Skin Conditions	73	3	0 - 18	44	0	0 - 14
Neuropsychiatric/Sensory Disease	37	3	0 - 32	42	2	0 - 31
Urologic Disease	16	0	0 - 87	17	0	0 - 63

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	127
Occupancy Rate (%):	58
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	35
Interns and Residents:	0
Registered Nurses:	51
Licensed Practical Nurses:	60

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

GREENSVILLE MEMORIAL HOSPITAL

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Re: Greensville Memorial Hospital
ID 490097

Dear Mrs. Kappert:

The Health Care Financing Administration (HCFA) has released the annual mortality figures for Greensville Memorial Hospital. These figures confirm what health care professionals have maintained about Greensville Memorial Hospital,namely, that our patients receive care at a level comparable to or better than that provided nationwide. The sole area in which Greensville Memorial Hospital exceeded the national norm for mortality figures was cancer. (National rate: 28 - 61% and Greensville Memorial Hospital rate: 71%)

Greensville Memorial Hospital has long had the motto "Lifting the Level of Life' as its publically proclaimed goal. Implicit in this goal is the assumption that this mission can also be reached by caring for the dying and their families. This philosophy, and the community hosptial environment, produces a hospital that finds itself caring for a disproportionate number of dying cancer patients. In reviewing the charts listed by HCFA, we found that ninety percent of these patients had been referred to oncology centers outside of Southside Virginia for diagnostic and/or therapeutic treatment. The center most often used was Medical College of Virginia. When aggressive therapy at these centers was terminated, the patient was referred back to Greensville Memorial Hospital for supportive therapy. This return referral allowed the patients to be cared for closer to home and maintained those family ties so important at the time of death. In more than eight-five percent of the cases, the family cared for the patient at home during the terminal stages.

Recognizing the needs of these families, Greensville Memorial Hospital has been active in supporting Hospice of Southside Virginia. Greensville Memorial Home Health Care Services (a division of GMH) also actively assists these families in caring for their loved ones. The next planned expansion of services is the Nursing Home Annex to Greensville Memorial

Hospital.

Survival times fell into two primary groups. Fifty percent of the patients survived at least two years and one as many as twelve years from the point of the initial diagnosis. The other fifty percent survived no more than seven months from the initial point of diagnosis. In over eighty percent of the cases, these patients had not sought medical advice for two - five years prior to the diagnosis of cancer being made.

Recognizing that Emporia/Greensville is an economically depressed area with a long history of high poverty levels, Greensville Memorial Hospital has provided care freely without discrimination on the basis of ability to pay. Approximately thirty-three percent of billed revenues are written off each fiscal year. In a second effort to "Lift the Level of Life," Greensville Memorial Hospital provides community education health services at no charge to the citizens of Greensville Memorial Hospital area.

We appreciate the opportunity to express our concerns about this matter.

Sincerely,

John A. Thurman
Administrator

JAT:pp

HALIFAX COMMUNITY HOSP

PO BOX 310
SOUTH BOSTON, VA 24592

Medicare Hospital Provider Number: 490013

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,378	12	10 - 14	1,408	13	10 - 15
Cancer	27	52	26 - 64	47	57	27 - 58
Cerebrovascular Accidents	47	28	17 - 43	53	36	15 - 42
Gastrointestinal Catastrophes	5	60	8 - 79	3	0	1 - 82
Infectious Disease	15	33	12 - 59	12	25	14 - 64
Metabolic/Electrolyte Disorders	53	21	12 - 41	64	25	10 - 38
Pulmonary Disease	104	25	18 - 38	119	29	17 - 37
Renal Failure	5	80	5 - 78	3	33	1 - 89
Severe Acute Heart Disease	52	25	24 - 49	44	43	23 - 53
Severe Chronic Heart Disease	83	33	15 - 36	86	9	13 - 28
Severe Trauma	2	0	1 - 89	2	50	3 - 92
Gastrointestinal Disease	103	2	1 - 10	106	0	1 - 6
Gynecologic Disease	18	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	141	1	2 - 7	135	1	1 - 7
Musculoskeletal/Skin Conditions	126	5	0 - 14	102	2	0 - 11
Neuropsychiatric/Sensory Disease	43	0	0 - 18	44	5	0 - 52
Urologic Disease	39	0	0 - 22	35	0	0 - 31

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	192
Occupancy Rate (%):	56
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	46
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	84
Licensed Practical Nurses:	70

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HENRICO DOCTORS HOSP

1602 SKIPWITH RD
RICHMOND, VA 23229

Medicare Hospital Provider Number: 490118

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,632	7	8 - 12	2,498	9	8 - 12
Cancer	59	42	30 - 58	61	31	27 - 53
Cerebrovascular Accidents	76	21	16 - 36	65	26	17 - 40
Gastrointestinal Catastrophes	13	38	16 - 67	15	33	17 - 65
Infectious Disease	10	40	11 - 68	10	20	15 - 66
Metabolic/Electrolyte Disorders	21	29	7 - 50	34	38	9 - 46
Pulmonary Disease	96	16	14 - 32	83	24	14 - 36
Renal Failure	6	33	13 - 83	7	57	8 - 78
Severe Acute Heart Disease	92	24	28 - 48	82	24	28 - 49
Severe Chronic Heart Disease	144	19	16 - 31	144	24	16 - 32
Severe Trauma	3	67	3 - 86	2	50	2 - 92
Gastrointestinal Disease	214	2	1 - 7	188	3	1 - 8
Gynecologic Disease	24	0	0 -100	30	0	0 -100
Low-Risk Heart Disease	549	2	2 - 6	457	4	2 - 6
Musculoskeletal/Skin Conditions	349	2	1 - 5	296	2	1 - 5
Neuropsychiatric/Sensory Disease	65	0	1 - 9	73	7	0 - 39
Urologic Disease	109	0	0 - 6	106	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	312
Ownership/Control:	Private, For Profit

STAFFING

Interns and Residents:	0
Registered Nurses:	520
Licensed Practical Nurses:	42

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

HIRIAM DAVIS MEM HOSP

P O BOX 4030
PETERSBURG, VA 23803

Medicare Hospital Provider Number: 490104

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	140	7	4 - 14	140	9	4 - 15
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	1	0	0 -100	0	-	-
Infectious Disease	4	50	10 - 86	4	0	6 - 71
Metabolic/Electrolyte Disorders	9	0	1 - 51	11	9	1 - 57
Pulmonary Disease	13	8	6 - 45	17	47	7 - 54
Renal Failure	0	-	-	1	0	2 - 97
Severe Acute Heart Disease	0	-	-	1	100	1 - 97
Severe Chronic Heart Disease	2	50	3 - 92	1	100	0 - 97
Severe Trauma	3	0	3 - 80	3	0	5 - 80
Gastrointestinal Disease	44	0	0 - 94	45	0	0 - 69
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	2	0	0 -100	3	0	0 -100
Musculoskeletal/Skin Conditions	6	0	0 -100	4	0	0 -100
Neuropsychiatric/Sensory Disease	13	0	0 -100	12	0	0 -100
Urologic Disease	1	0	0 -100	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	87
Ownership/Control:	State Government

STAFFING

Interns and Residents:	0
Registered Nurses:	7
Licensed Practical Nurses:	2

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HOSPICE OF NORTHERN VA INC

4715 N 15 ST
ARLINGTON, VA 22205

Medicare Hospital Provider Number: 490129

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	7	71	3 - 69	46	74	23 - 49
Cancer	0	-	-	25	68	26 - 63
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	1	0	2 - 97	2	100	9 - 93
Infectious Disease	0	-	-	1	100	0 - 97
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	1	100	3 - 98	0	-	-
Renal Failure	0	-	-	1	100	1 - 97
Severe Acute Heart Disease	0	-	-	1	100	2 - 97
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	0	-	-	1	100	0 - 98
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	1	0	0 -100	0	-	-
Musculoskeletal/Skin Conditions	1	100	0 -100	2	50	0 - 97
Neuropsychiatric/Sensory Disease	0	-	-	0	-	-
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#): 25
Ownership/Control: Private, Non-profit

STAFFING

Interns and Residents: 0
Registered Nurses: 26
Licensed Practical Nurses: 1

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: No
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: Yes

HOSPICE
OF NORTHERN VIRGINIA
4715 North 15th Street
Arlington, Virginia 22205
(703) 525-7070

September 26, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Thank you for the most recent opportunity from the Health Care Financing Administration to comment on its Medicare Hospital Mortality Information (1987).

Following the initial publication of the mortality information, I contacted a HCFA representative to share my concerns that including a hospice organization in the study had the potential of skewing its outcome. As you are aware, the purpose of hospice services is to assist patients and families throughout the terminal stages of their lives by improving and increasing the quality of life during those days. Hospice of Northern Virginia currently has 25 acute care beds to support its large hospice home care program. While the majority of hospice patients in our program choose and are supported to die at home in familiar surroundings, a number of them die within our hospital setting. These deaths, however, given the nature and purpose of our hospice program, are both predictable and expected. To include a sampling of hospice patients in a national hospital study of the nature that HCFA accomplished, I believe, threatens or at least distorts mortality information.

If I can provide you with any additional information or clarification, please don't hesitate to ask.

Sincerely,

Mary L. Stone

Mary L. Stone
Administrator

MS:cs

HUMANA HOSP BAYSIDE

800 INDEPENDENCE BLVD
VIRGINIA BEACH, VA 23455

Medicare Hospital Provider Number: 490119

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,326	12	8 - 13	1,270	13	9 - 14
Cancer	47	43	29 - 59	44	61	30 - 61
Cerebrovascular Accidents	34	35	14 - 47	48	17	17 - 40
Gastrointestinal Catastrophes	11	36	9 - 64	14	14	17 - 59
Infectious Disease	12	50	8 - 62	18	33	19 - 64
Metabolic/Electrolyte Disorders	37	30	11 - 45	46	28	10 - 41
Pulmonary Disease	42	26	13 - 41	86	23	16 - 37
Renal Failure	1	0	0 - 98	2	100	4 - 89
Severe Acute Heart Disease	43	51	26 - 57	37	22	24 - 52
Severe Chronic Heart Disease	49	22	11 - 36	58	41	11 - 38
Severe Trauma	2	0	1 - 91	1	0	0 - 99
Gastrointestinal Disease	98	5	0 - 17	93	4	0 - 15
Gynecologic Disease	13	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	200	4	1 - 8	178	4	1 - 8
Musculoskeletal/Skin Conditions	145	1	0 - 8	135	3	0 - 11
Neuropsychiatric/Sensory Disease	60	3	0 - 29	46	7	0 - 36
Urologic Disease	58	0	1 - 10	40	5	0 - 54

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 250
Occupancy Rate (%): 49
Ownership/Control: Private, For Profit

STAFFING

Total Number of Physicians: (not available)
Percent of Physicians Who Are Board Certified Specialists: (not available)
Interns and Residents: 0
Registered Nurses: 128
Licensed Practical Nurses: 38

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

800 Independence Blvd.
P.O. Box 5695
Virginia Beach, Virginia
23455-6076
Telephone 804 460-8000

**Humana Hospital
Bayside**

Medicare Provider No. 490119

October 25, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Blvd.
Baltimore, MD 21207

Dear Mrs. Kappert:

I appreciate the opportunity to comment on the Medicare patient mortality data and the hospital profile characteristics to be published by the Health Care Financing Administration. The information does serve as a part of this hospital's and the health care industry's ongoing quality assurance programs.

HCFA's efforts to provide our hospital, specifically, and the health care industry, in general, with quality assurance information should be commended.

I also appreciate your public position that even though attempts have been made to further refine the manipulation of the data, this information is limited and cannot be used as a complete measure of quality.

I am very proud of our quality assurance program that is in place at Humana Hospital-Bayside; it is well-established and includes routine review by the Joint Commission on Accreditation of Healthcare Organizations and other outside review agencies, ongoing utilization review, quality assurance, in-hospital morbidity and mortality reviews and analyses of all inpatient mortality.

The raw numbers that you have provided in this release further assist us in confirming our records and in analyzing Medicare patient mortality.

The quality assurance staff has reviewed the statistics provided by HCFA. Since some of the deaths attributed to patients in our hospital occurred after discharge, we have been unable to completely validate the data. By category, the number of patients in many cases is too limited to provide a valid statistical analysis. Additionally, predicted ranges have been developed in such a complex and unverifiable way, it would be useless to consider them "standard" ranges.

I also am concerned that the information listed under "Hospital Characteristics" contains inaccurate figures inconsistent with our hospital records, thus, we are unable to confirm any of that data.

We stand ready to aid our community in reviewing this very complex data and explaining how this type of information is used to affirm and improve the quality of health care services.

Sincerely,

Jerry Sutphin
Executive Director

JS:ds

HUMANA HOSP CLINCH VALLEY

2949 W FRONT ST
RICHLANDS, VA 24641

Medicare Hospital Provider Number: 490060

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,188	8	8 - 12	1,087	9	7 - 12
Cancer	19	53	25 - 69	25	40	27 - 66
Cerebrovascular Accidents	29	21	14 - 45	22	45	14 - 54
Gastrointestinal Catastrophes	1	0	0 - 99	10	50	8 - 66
Infectious Disease	3	33	3 - 86	2	50	2 - 92
Metabolic/Electrolyte Disorders	53	11	8 - 34	4	75	8 - 82
Pulmonary Disease	99	15	15 - 33	102	18	16 - 35
Renal Failure	1	0	1 - 97	2	50	1 - 94
Severe Acute Heart Disease	44	32	23 - 51	22	27	20 - 58
Severe Chronic Heart Disease	47	23	12 - 37	33	33	11 - 44
Severe Trauma	2	50	1 - 92	0	-	-
Gastrointestinal Disease	113	3	1 - 10	122	3	1 - 10
Gynecologic Disease	9	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	173	1	1 - 6	185	2	2 - 7
Musculoskeletal/Skin Conditions	112	1	0 - 8	104	2	0 - 10
Neuropsychiatric/Sensory Disease	76	1	0 - 13	51	0	0 - 17
Urologic Disease	43	2	0 - 45	36	0	0 - 34

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	200
Occupancy Rate (%):	60
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	55
Percent of Physicians Who Are Board Certified Specialists:	56
Interns and Residents:	0
Registered Nurses:	83
Licensed Practical Nurses:	53

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Medicare Provider No: 490060-0

Humana Hospital
Clinch Valley

October 20, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Blvd.
Baltimore, MD 21207

Dear Mrs. Kappert:

I appreciate the opportunity to comment on the Medicare patient mortality data and the hospital profile characteristics to be published by the Health Care Financing Administration. The information does serve as a part of this hospital's and the health care industry's ongoing quality assurance programs.

HCFA's efforts to provide our hospital specifically, and the health care industry in general, with quality assurance information should be commended.

I also appreciate your public position that even though attempts have been made to further refine the manipulation of the data, this information is limited and cannot be used as a complete measure of quality.

I am very proud of our quality assurance program that is in place at Humana Hospital-Clinch Valley; it is well-established and includes routine review by the Joint Commission on Accreditation of Healthcare Organizations and other outside review agencies, ongoing utilization review, quality assurance, in-hospital morbidity and mortality reviews and analyses of all inpatient mortality.

The raw numbers that you have provided in this release further assist us in confirming our records and in analyzing Medicare patient mortality.

The Quality Assurance Staff has reviewed the statistics provided by HCFA. Since some of the deaths attributed to patients in our hospital occurred after discharge, we have been unable to completely validate the data. By category, the number of patients in many cases is too limited to provide a valid statistical analysis. Additionally, predicted ranges have been developed in such a complex and unverifiable way, it would be useless to consider them "standard" ranges.

I also am concerned that the information listed under "Hospital Characteristics" contains inaccurate figures inconsistent with our hospital records, thus we are unable to confirm any of that data.

We stand ready to aid our community in reviewing this very complex data and explaining how this type of information is used to affirm and improve the quality of health care services.

Sincerely,

W. A. Gillespie

W. A. Gillespie
Executive Director

WAG/ksh

HUMANA HOSP-ST LUKES

7700 PARHAM RD
RICHMOND, VA 23229

Medicare Hospital Provider Number: 490015

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,239	11	9 - 14	1,343	11	9 - 14
Cancer	42	26	26 - 56	43	53	28 - 60
Cerebrovascular Accidents	72	29	14 - 37	54	19	18 - 40
Gastrointestinal Catastrophes	7	71	10 - 72	15	40	14 - 63
Infectious Disease	22	36	16 - 58	7	29	13 - 75
Metabolic/Electrolyte Disorders	20	30	15 - 57	24	13	13 - 46
Pulmonary Disease	44	23	11 - 38	59	27	12 - 38
Renal Failure	3	33	7 - 89	7	14	10 - 74
Severe Acute Heart Disease	44	32	23 - 51	48	29	23 - 50
Severe Chronic Heart Disease	67	19	13 - 34	65	23	14 - 36
Severe Trauma	6	0	5 - 59	6	67	7 - 75
Gastrointestinal Disease	84	4	0 - 15	83	0	1 - 7
Gynecologic Disease	6	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	124	4	1 - 10	135	1	1 - 7
Musculoskeletal/Skin Conditions	196	3	0 - 9	205	1	1 - 6
Neuropsychiatric/Sensory Disease	30	10	0 - 42	38	3	0 - 65
Urologic Disease	47	2	0 - 58	58	3	0 - 32

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 140
Occupancy Rate (%): 69
Ownership/Control: Private, For Profit

STAFFING

Total Number of Physicians: 110
Percent of Physicians Who Are Board Certified Specialists: 95
Interns and Residents: 0
Registered Nurses: 104
Licensed Practical Nurses: 34

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

Medicare Provider No. 490015

Humana Hospital
St. Lukes

October 20, 1988

Mrs. Sandra Kappert
Health Standards and Quality
Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Blvd.
Baltimore, MD 21207

Dear Mrs. Kappert:

I appreciate the opportunity to comment on the Medicare patient mortality data and the hospital profile characteristics to be published by the Health Care Financing Administration. The information does serve as a part of this hospital's and the health care industry's ongoing quality assurance programs.

HCFA's efforts to provide our hospital specifically, and the health care industry in general, with quality assurance information should be commended.

I also appreciate your public position that even though attempts have been made to further refine the manipulation of the data, this information is limited and cannot be used as a complete measure of quality.

I am very proud of our quality assurance program that is in place at Humana Hospital-St. Lukes; it is well-established and includes routine review by the Joint Commission on Accreditation of Healthcare Organizations and other outside review agencies, ongoing utilization review, quality assurance, in-hospital morbidity and mortality reviews and analyses of all inpatient mortality.

The raw numbers that you have provided in this release further assist us in confirming our records and in analyzing Medicare patient mortality.

The Medical Records Department and Quality Assurance staff have reviewed the statistics provided by HCFA. Since some of the deaths attributed to patients in our hospital occurred after discharge, we have been unable to completely validate the data. By category, the number of patients in many cases is too limited to provide a valid statistical analysis. Additionally, predicted ranges have been developed in such a complex and unverifiable way, it would be useless to consider them "standard" ranges.

I also am concerned that the information listed under "Hospital Characteristics" contains inaccurate figures inconsistent with our hospital records, thus we are unable to confirm any of that data.

We stand ready to aid our community in reviewing this very complex data and explaining how this type of information is used to affirm and improve the quality of health care services.

Sincerely,

Nancy R. Hofheimer

Nancy R. Hofheimer
Executive Director

lmw/

JEFFERSON MEMORIAL HOSPITAL

4600 KING STREET
ALEXANDRIA, VA 22302

Medicare Hospital Provider Number: 490008

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	465	7	7 - 13	521	7	7 - 13
Cancer	14	43	23 - 72	15	53	23 - 71
Cerebrovascular Accidents	12	17	11 - 56	7	0	5 - 52
Gastrointestinal Catastrophes	3	33	6 - 87	7	14	13 - 70
Infectious Disease	3	67	8 - 89	0	-	-
Metabolic/Electrolyte Disorders	9	33	5 - 65	9	22	2 - 64
Pulmonary Disease	16	25	10 - 53	23	13	12 - 43
Renal Failure	3	0	8 - 83	0	-	-
Severe Acute Heart Disease	5	0	12 - 68	9	33	19 - 75
Severe Chronic Heart Disease	26	15	10 - 40	34	18	12 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	33	0	0 - 26	43	2	0 - 21
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	71	3	0 - 14	64	3	1 - 15
Musculoskeletal/Skin Conditions	61	2	0 - 22	70	0	0 - 11
Neuropsychiatric/Sensory Disease	18	0	0 - 75	17	6	0 - 99
Urologic Disease	17	0	0 - 86	13	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	120
Occupancy Rate (%):	53
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	80
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	96
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

JEFFERSON HOSPITAL
FAIRFAX HOSPITAL SYSTEM

Jefferson Hospital
4600 King Street
Alexandria, Virginia 22302
703 931-9700

Richard A. Levy, Jr.
Vice President, Fairfax Hospital System
Administrator, Jefferson Hospital

Hospital I.D. #490008

October 21, 1988

Mrs. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
2-3-2 Meadows East Building
6325 Security Blvd.
Baltimore, MD 21207

Dear Mrs. Kappert:

We are pleased to have the opportunity to review and comment on the material that HCFA has gathered for the December 1988 report on Medicare mortality data. The Administration and Medical Staff of Jefferson Hospital support Quality Assurance efforts such as yours.

We proudly note, as we did for 1986, that our mortality rates do fall within or below the ranges predicted by the HCFA model. We feel that the clinical review of the patients' records do confirm the appropriateness of care rendered.

DATA VERIFICATION

A review of our records confirm that there were 465 Medicare admissions of which 66 expired.

We found that the data submitted by HCFA did list the expiration of two (2) patients who in fact were never admitted to Jefferson Hospital in 1987 or at any previous time. All other patients have been verified.

The characteristics of Jefferson are as follows:

Bed #: 120
Occupancy rate: 51%
ownership/control: not-for-profit
Coronary care units: yes
total of physicians on active staff: 82
% of physicians who are Board Certified: 65%

DATA INTERPRETATION

Jefferson Hospital falls within the predicted range in all diagnostic categories.

Jefferson Hospital's Quality Assurance Committee reviewed all 67 patients.

The Q.A. Committee gave top attention to the category that received the highest mortality rating by the HCFA document (infectious disease = 67%). We found that there were only 3 patients in this category and that 2 had expired. Both patients would have been expected to have a compromised immune system and susceptible to the infectious process.

All death charts are reviewed on a monthly basis by the Q.A. Committee, not just Medicare deaths.

Of the 67 Medicare patients who died, 17 were discharged to home, 6 were discharged to home health agencies, 1 to an Intermediate Care Facility, 5 to a Skilled Nursing Facility, 1 to Acute Care Center, and 1 "other."

Again, we appreciate this opportunity to review and comment.

Sincerely,

ROBERT C. VENABLE Associate Administrator	MICHAEL C. DAVIDOV, M.D. Medical Staff President

JOHN RANDOLPH HOSP

411 W RANDOLPH RD
HOPEWELL, VA 23860

Medicare Hospital Provider Number: 490020

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,048	12	9 - 15	1,027	12	10 - 15
Cancer	19	53	20 - 64	20	70	20 - 61
Cerebrovascular Accidents	33	12	11 - 36	41	15	15 - 39
Gastrointestinal Catastrophes	6	50	7 - 76	7	71	15 - 77
Infectious Disease	12	17	11 - 57	14	29	14 - 62
Metabolic/Electrolyte Disorders	41	27	11 - 44	47	28	9 - 40
Pulmonary Disease	95	29	17 - 38	93	18	18 - 37
Renal Failure	5	80	7 - 79	7	86	23 - 86
Severe Acute Heart Disease	36	44	23 - 56	36	39	23 - 55
Severe Chronic Heart Disease	53	19	14 - 36	67	18	15 - 35
Severe Trauma	2	0	1 - 90	1	0	1 - 97
Gastrointestinal Disease	105	3	1 - 10	70	0	1 - 8
Gynecologic Disease	5	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	129	5	1 - 11	137	2	1 - 8
Musculoskeletal/Skin Conditions	70	0	0 - 9	77	3	0 - 13
Neuropsychiatric/Sensory Disease	29	3	0 - 63	33	0	0 - 72
Urologic Disease	47	4	0 - 81	54	4	0 - 36

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	120
Occupancy Rate (%):	60
Ownership/Control:	District/Authority

STAFFING

Total Number of Physicians:	78
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	92
Licensed Practical Nurses:	40

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PROVIDER #490020

John Randolph
HOSPITAL

October 19, 1988

Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Mrs. Sandra Kappert

Dear Mrs. Kappert:

We are in receipt of the mortality rates which pertain to John Randolph Hospital. We are pleased to note that overall our mortality rates are well within your published range of predicted rates.

It has been the practice of John Randolph Hospital for many years to review all mortalities in their respective departmental audit committee. This is an ongoing cooperative effort between physicians, administration and staff to assure the very best care for the citizens of our community.

We appreciate receiving this data in advance of its press release and the opportunity to respond.

Sincerely,

David A. Layman

David A. Layman, M.D.
Chairman, Medical Records/Utilization
Review Committee

William C. Caldwell

William Caldwell
Administrator

DAL/WC/bg

JOHNSTON MEMORIAL HOSP

COURT ST
ABINGDON, VA 24210

Medicare Hospital Provider Number: 490053

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,105	16	10 - 15	1,149	14	9 - 14
Cancer	43	53	31 - 63	26	42	20 - 59
Cerebrovascular Accidents	45	31	15 - 43	29	31	13 - 47
Gastrointestinal Catastrophes	10	40	12 - 69	12	25	11 - 61
Infectious Disease	11	18	12 - 61	7	29	11 - 73
Metabolic/Electrolyte Disorders	15	20	5 - 52	21	24	10 - 50
Pulmonary Disease	147	34	15 - 33	134	31	15 - 34
Renal Failure	2	50	1 - 93	1	100	3 - 99
Severe Acute Heart Disease	34	35	21 - 53	33	45	22 - 56
Severe Chronic Heart Disease	51	31	10 - 37	55	25	12 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	67	3	0 - 17	92	2	1 - 11
Gynecologic Disease	17	0	0 -100	12	0	0 -100
Low-Risk Heart Disease	104	3	1 - 10	96	2	1 - 10
Musculoskeletal/Skin Conditions	98	2	0 - 14	119	3	0 - 13
Neuropsychiatric/Sensory Disease	20	0	0 - 46	20	0	0 - 92
Urologic Disease	36	3	0 - 30	38	5	0 - 60

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	154
Occupancy Rate (%):	62
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	36
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	0
Registered Nurses:	99
Licensed Practical Nurses:	46

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

JOHNSTON-WILLIS HOSPITAL

1401 JOHNSTON-WILLIS DR
RICHMOND, VA 23235

Medicare Hospital Provider Number: 490028

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,780	12	10 - 15	1,694	11	10 - 15
Cancer	80	47	30 - 56	64	41	27 - 55
Cerebrovascular Accidents	82	23	16 - 36	79	19	18 - 37
Gastrointestinal Catastrophes	24	25	24 - 62	16	38	11 - 59
Infectious Disease	15	27	13 - 58	20	60	21 - 64
Metabolic/Electrolyte Disorders	27	41	16 - 55	28	36	17 - 55
Pulmonary Disease	97	29	16 - 37	83	34	15 - 38
Renal Failure	5	20	8 - 80	3	33	12 - 95
Severe Acute Heart Disease	58	33	24 - 50	47	28	24 - 51
Severe Chronic Heart Disease	77	22	14 - 34	75	23	14 - 34
Severe Trauma	3	0	3 - 79	3	67	1 - 88
Gastrointestinal Disease	163	4	1 - 10	147	1	1 - 6
Gynecologic Disease	18	6	0 -100	9	0	0 -100
Low-Risk Heart Disease	197	2	1 - 7	170	1	1 - 5
Musculoskeletal/Skin Conditions	160	4	0 - 10	170	2	1 - 8
Neuropsychiatric/Sensory Disease	45	4	1 - 21	33	3	0 - 27
Urologic Disease	92	2	0 - 16	89	1	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	232
Occupancy Rate (%):	65
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	244
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	17
Registered Nurses:	191
Licensed Practical Nurses:	43

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	Yes

HCA Johnston-Willis
Hospital

October 18, 1988

Health Standards and Quality Bureau, HCFA
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207
ATTENTION: Mrs. Sandra Kappert

Dear Mrs. Kappert:

Please find attached comments on the 1987 HCFA Mortality Data for Johnston-Willis Hospital, Richmond, VA, Hospital ID Number 490028.

If you have any questions regarding these comments, please do not hesitate to call me at (804) 330-2009.

Sincerely,

Lucien Roberts

Lucien W. Roberts, III
Assistant Administrator

LR/cdw

JOHNSTON-WILLIS HOSPITAL
COMMENTS TO HCFA
ON MORTALITY INFORMATION

HOSPITAL ID NUMBER - 490028

Johnston-Willis Hospital has a continuing evaluation of hospital mortalities incorporated into its review of the quality of patient care. All deaths are reviewed by the Subcommittee of the Quality Assurance Committee each month.

The HCFA data has been reviewed. Comments on this data are as follows:

A. The HCFA data contains sample of 1,780 reported cases of Medicare patients whose last 1987 admission occurred at Johnston-Willis. Johnston-Willis has no means to verify this number. There were a total of 2,920 Medicare admissions to Johnston-Willis Hospital in 1987.

B. HCFA reports 211 Medicare deaths within 30 days of admission, either in the Hospital or post-discharge, and reported 25 of the 211 deaths were post discharge. Hospital records indicate that two of the deaths [redacted] -- which were reported as post-discharge deaths actually occurred in the Hospital.

C. Within the category of Pulmonary Disease, there were two cases -- [redacted] -- which could not be verified by either the medical record number or the first six letters of the surname. The Hospital did identify these patients by their insurance numbers and provides the following correct information for their names and numbers:

[redacted]

KINGS DAUGHTERS HOSP

1410 N AUGUSTA AVE
STAUNTON, VA 24401

Medicare Hospital Provider Number: 490029

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,482	10	9 - 14	1,643	12	9 - 14
Cancer	48	54	30 - 61	60	57	29 - 57
Cerebrovascular Accidents	61	21	18 - 40	75	31	18 - 40
Gastrointestinal Catastrophes	9	22	13 - 68	15	33	15 - 63
Infectious Disease	12	50	13 - 67	16	31	16 - 62
Metabolic/Electrolyte Disorders	17	24	9 - 53	17	47	4 - 55
Pulmonary Disease	101	19	15 - 34	118	23	13 - 32
Renal Failure	5	0	12 - 75	12	67	17 - 77
Severe Acute Heart Disease	72	32	25 - 48	82	32	26 - 48
Severe Chronic Heart Disease	50	20	11 - 35	61	30	13 - 37
Severe Trauma	0	-	-	2	0	1 - 92
Gastrointestinal Disease	140	4	1 - 10	131	3	0 - 10
Gynecologic Disease	10	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	131	6	1 - 12	157	4	2 - 9
Musculoskeletal/Skin Conditions	150	1	1 - 6	169	1	1 - 5
Neuropsychiatric/Sensory Disease	83	4	1 - 14	89	1	0 - 10
Urologic Disease	53	4	0 - 52	68	0	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	198
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	64
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	99
Licensed Practical Nurses:	89

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LEE CO HOSP

HARRELL ST
PENNINGTON GAP, VA 24277

Medicare Hospital Provider Number: 490012

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	595	10	9 - 15	675	11	10 - 16
Cancer	5	80	11 - 78	8	63	22 - 82
Cerebrovascular Accidents	19	21	12 - 50	26	35	13 - 50
Gastrointestinal Catastrophes	2	0	1 - 92	4	50	6 - 83
Infectious Disease	3	0	3 - 79	0	-	-
Metabolic/Electrolyte Disorders	15	13	10 - 51	17	35	10 - 56
Pulmonary Disease	63	22	15 - 38	87	18	18 - 38
Renal Failure	2	0	5 - 90	2	50	7 - 96
Severe Acute Heart Disease	32	28	23 - 55	29	21	23 - 54
Severe Chronic Heart Disease	26	19	12 - 44	37	16	14 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	55	0	1 - 10	67	0	1 - 8
Gynecologic Disease	2	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	98	3	1 - 11	106	5	1 - 12
Musculoskeletal/Skin Conditions	47	0	0 - 14	44	7	0 - 38
Neuropsychiatric/Sensory Disease	13	0	0 - 82	17	6	0 - 99
Urologic Disease	26	0	0 - 90	7	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	80
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

LEWIS-GALE HOSPITAL

1900 ELECTRIC ROAD
SALEM, VA 24153

Medicare Hospital Provider Number: 490048

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,050	10	9 - 13	3,200	9	8 - 12
Cancer	87	40	30 - 55	91	42	28 - 52
Cerebrovascular Accidents	120	30	19 - 37	130	17	19 - 34
Gastrointestinal Catastrophes	22	55	13 - 56	24	17	13 - 49
Infectious Disease	55	27	22 - 50	37	41	20 - 54
Metabolic/Electrolyte Disorders	41	41	15 - 49	27	15	11 - 44
Pulmonary Disease	140	27	18 - 36	132	18	16 - 33
Renal Failure	11	27	13 - 73	14	43	12 - 71
Severe Acute Heart Disease	97	33	29 - 50	93	33	26 - 47
Severe Chronic Heart Disease	153	14	15 - 28	139	21	15 - 31
Severe Trauma	4	0	9 - 74	8	0	12 - 56
Gastrointestinal Disease	275	5	1 - 8	245	3	1 - 7
Gynecologic Disease	27	0	0 -100	24	0	0 -100
Low-Risk Heart Disease	359	3	2 - 6	354	3	2 - 6
Musculoskeletal/Skin Conditions	357	2	1 - 5	403	2	0 - 5
Neuropsychiatric/Sensory Disease	161	4	1 - 10	154	2	1 - 8
Urologic Disease	115	4	0 - 15	98	3	0 - 26

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	346
Occupancy Rate (%):	67
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	112
Percent of Physicians Who Are Board Certified Specialists:	79
Interns and Residents:	14
Registered Nurses:	235
Licensed Practical Nurses:	34

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HCA Lewis-Gale Hospital

October 10, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Blvd.
Baltimore, MD 21207

Medicare Provider
Number: 490048

Dear Mrs. Kappert:

In response to Dr. Roper's letter relative to the forthcoming release of HCA Lewis-Gale Hospital Medicare Mortality, I would respectfully ask that the report consider the following points and be amended where indicated.

1. MORTALITY STATISTICS: Lewis-Gale Hospital

   - The information from the Medicare Hospital Mortality Study has been verified for accuracy and the following discrepancies in the data were noted:

Page #	
8	Diagnosis code should be 530.0 and not 560.0
24	Date of death states [redacted]. Actual date of death was [redacted] at Lewis-Gale Hospital.
39	Date of death states [redacted]. Actual date of death was [redacted] at Lewis-Gale Hospital.
40	Date of admissions should be [redacted].
43	Date of death states [redacted]. Actual date of death was [redacted] at Lewis-Gale Hospital.

53 Patients last date of discharge states [redacted] Date of death states [redacted]. According to Medical Record the patient did not expire at Lewis-Gale Hospital.

60 Date of death states [redacted]. Actual date of death was [redacted] at Lewis-Gale Hospital.

- 265 patients did not expire at Lewis-Gale Hospital.
- The Medicare Mortality Predictor System information was verified and found to be accurate.

2. HOSPITAL CHARACTERISTICS 1986

A. Beds: 244 - The number of beds only reflects designated Medical/Surgical beds and should not be used to calculate registered nurses and licensed practical nurse ratios since the "total" RN/LPN staffing compliment was used in the AHA report. This approach substantially distorts the ratio and greatly distorts the reported occupancy ratio.

:Requested Amendment.

Please use the hospital's total operating beds as the basis for calculating ratios. See attached Schedule "A" for correct calculations.

B. Occupancy Rate: 73% - By using only 244 medical/surgical beds the calculated occupancy rate is in error.

:Requested Amendment.

Please use the hospital's total operating beds and total patient days as the basis for calculating ratios. See attached Schedule "A" for correct calculations.

C. Staffing: Physicians - The reported number of physicians on staff was in error.

:Requested Amendment

Please see Schedule "A" for correction. Use 271 instead of 263.

D. % of Physicians Board Certified - The percent Board Certified physicians was in error.

:Requested Amendment

Please see Schedule "A" for correction. 231 Active and Courtesy Staff physicians were Board Certified producing a percentage of 85%.

E. Interns/Residents per Bed

:Requested Amendment

Please see Schedule "A" for correction.

F. Requested Nurses Per Bed

The number of total operating beds was not used as the denominator to calculate this statistic. Please use "total operating beds".

:Requested Amendments:

Please see Schedule "A" for correction.

G. Licensed Practical Nurse Per Bed

The number of total operational beds was not used as the denominator to calculate this statistic. Please use "Total Operating Beds".

:Requested Amendment

Please see Schedule "A" for correction.

H. Specialty Services

- No amendments.

Please either make the noted changes or publish the data as submitted with the attached Schedule "A".

Very sincerely,

Karl N. Miller
Administrator

KNM/h

attachments

SCHEDULE "A"

HOSPITAL CHARACTERISTICS

(Corrected)

HCA LEWIS-GALE HOSPITAL

		SURVEY YEAR 1986	SURVEY YEAR 1987
I.	**BEDS #:**		
	A. Total Operational Beds	= 380	346
II.	**OCCUPANCY RATE**		
	Total Patient Days	= 97,542	88,295
	Days in Year	= 366	365
	Total Operational Beds	= 380	346
	Total Potential Days	= 139,080	126,290
	A. Occupancy Rate	$\frac{= 97{,}542}{= 139{,}080} = 70.1\%$	$\frac{88{,}295}{126{,}290} = 69.9\%$
III.	**STAFFING**		
	A. **Physicians**		
	1. Total	= 271	303
	2. % Board Certified	= 85% (231)	78% (236)
	B. **Interns/Residents/Bed**	= No Change	No Change
	C. **Registered Nurses**		
	1. Total Operating Beds	= 380	346
	2. Total Patient Days	= 97,542	88,295
	3. Total R.N.'s	= 239	236
	4. R.N.'s per Occupied Bed	= .25%	.27%
	D. **Licensed Practical Nurses**		
	1. Total Operating Beds	= 380	346
	2. Total Patient Days	= 97,542	88,295
	3. Total L.P.N.'s	= 33	29
	4. L.P.N.'s per Occupied Bed	= .03%	.03%
IV.	**SPECIALTY SERVICES:**		

No change/no amendments

LONESOME PINE HOSP

DRAWER 1 HOLTON AVE
BIG STONE GAP, VA 24219

Medicare Hospital Provider Number: 490114

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	471	12	9 - 16	568	15	10 - 17
Cancer	7	71	23 - 84	9	89	29 - 77
Cerebrovascular Accidents	19	21	15 - 52	23	13	15 - 45
Gastrointestinal Catastrophes	1	0	0 -100	3	33	6 - 87
Infectious Disease	6	33	5 - 73	6	50	5 - 75
Metabolic/Electrolyte Disorders	8	25	4 - 66	15	13	4 - 48
Pulmonary Disease	51	24	15 - 41	67	33	18 - 43
Renal Failure	1	0	2 - 97	3	100	16 - 92
Severe Acute Heart Disease	25	36	22 - 59	29	41	23 - 58
Severe Chronic Heart Disease	29	14	9 - 37	23	9	13 - 40
Severe Trauma	0	-	-	1	100	1 - 97
Gastrointestinal Disease	38	0	0 - 31	55	2	0 - 17
Gynecologic Disease	2	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	54	2	1 - 14	66	9	0 - 27
Musculoskeletal/Skin Conditions	43	2	0 - 29	38	0	0 - 30
Neuropsychiatric/Sensory Disease	8	25	0 -100	16	6	0 - 98
Urologic Disease	14	7	0 - 97	15	0	0 - 94

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	60
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	23
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LOUDOUN MEMORIAL HOSPITAL

224 CORNWALL STREET NW
LEESBURG, VA 22075

Medicare Hospital Provider Number: 490043

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	757	12	10 - 15	778	12	8 - 14
Cancer	29	34	24 - 60	29	62	23 - 60
Cerebrovascular Accidents	36	14	14 - 38	31	19	13 - 43
Gastrointestinal Catastrophes	7	29	10 - 72	5	40	5 - 78
Infectious Disease	4	75	6 - 81	5	20	5 - 74
Metabolic/Electrolyte Disorders	9	56	6 - 67	13	15	2 - 53
Pulmonary Disease	57	18	15 - 38	47	17	13 - 37
Renal Failure	4	50	4 - 84	4	50	13 - 92
Severe Acute Heart Disease	33	61	20 - 54	20	45	17 - 59
Severe Chronic Heart Disease	41	29	10 - 39	42	24	9 - 36
Severe Trauma	4	0	4 - 71	2	100	2 - 88
Gastrointestinal Disease	57	4	1 - 18	45	4	0 - 33
Gynecologic Disease	6	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	74	3	1 - 13	86	5	1 - 13
Musculoskeletal/Skin Conditions	88	1	0 - 10	86	0	1 - 7
Neuropsychiatric/Sensory Disease	22	5	0 - 49	19	0	0 - 70
Urologic Disease	29	3	0 - 88	44	0	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	219
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	85
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	87
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LOUISE OBICI MEM HOSP

P O BOX 1100
SUFFOLK, VA 23434

Medicare Hospital Provider Number: 490044

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,455	12	9 - 14	1,595	12	9 - 14
Cancer	47	36	25 - 55	44	68	31 - 61
Cerebrovascular Accidents	71	30	13 - 36	72	11	15 - 32
Gastrointestinal Catastrophes	13	31	11 - 62	12	25	9 - 60
Infectious Disease	14	57	11 - 61	12	25	16 - 65
Metabolic/Electrolyte Disorders	39	23	14 - 46	29	21	9 - 44
Pulmonary Disease	76	13	14 - 32	124	22	15 - 33
Renal Failure	7	43	12 - 81	13	38	14 - 74
Severe Acute Heart Disease	47	43	22 - 51	54	39	26 - 53
Severe Chronic Heart Disease	85	15	13 - 30	93	23	12 - 31
Severe Trauma	4	75	4 - 80	2	50	2 - 92
Gastrointestinal Disease	136	4	2 - 10	146	3	1 - 9
Gynecologic Disease	15	0	0 -100	31	0	0 -100
Low-Risk Heart Disease	135	3	1 - 9	136	1	1 - 7
Musculoskeletal/Skin Conditions	135	4	0 - 11	137	4	1 - 10
Neuropsychiatric/Sensory Disease	55	4	0 - 22	59	5	0 - 21
Urologic Disease	64	0	0 - 25	71	1	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	202
Occupancy Rate (%):	62
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LYNCHBURG GENL HOSP DIV CENTRAL HLTH

TATE SPRINGS RD PO BOX 897
LYNCHBURG, VA 24506

Medicare Hospital Provider Number: 490095

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,119	12	10 - 14	3,203	13	10 - 14
Cancer	114	46	31 - 54	140	46	27 - 49
Cerebrovascular Accidents	141	33	17 - 34	161	31	18 - 35
Gastrointestinal Catastrophes	29	31	20 - 57	27	48	17 - 57
Infectious Disease	21	48	13 - 56	19	47	15 - 60
Metabolic/Electrolyte Disorders	58	16	9 - 36	49	20	10 - 39
Pulmonary Disease	170	28	16 - 33	164	19	16 - 32
Renal Failure	9	33	12 - 75	13	31	9 - 69
Severe Acute Heart Disease	134	27	28 - 46	139	35	28 - 46
Severe Chronic Heart Disease	181	20	15 - 29	177	18	15 - 29
Severe Trauma	8	75	6 - 67	11	45	6 - 64
Gastrointestinal Disease	243	4	2 - 8	240	5	1 - 8
Gynecologic Disease	5	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	262	3	2 - 7	304	5	1 - 7
Musculoskeletal/Skin Conditions	425	2	1 - 5	393	2	1 - 5
Neuropsychiatric/Sensory Disease	83	10	1 - 20	63	2	1 - 13
Urologic Disease	119	1	0 - 10	113	4	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	380
Occupancy Rate (%):	78
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	165
Percent of Physicians Who Are Board Certified Specialists:	96
Interns and Residents:	0
Registered Nurses:	182
Licensed Practical Nurses:	66

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MARTHA JEFFERSON HOSP

459 LOCUST AVE
CHARLOTTESVILLE, VA 22901

Medicare Hospital Provider Number: 490077

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,380	11	9 - 13	2,423	12	9 - 14
Cancer	93	41	31 - 55	86	47	31 - 56
Cerebrovascular Accidents	99	30	16 - 36	105	28	18 - 37
Gastrointestinal Catastrophes	21	43	15 - 58	19	42	16 - 61
Infectious Disease	23	35	16 - 56	24	42	17 - 58
Metabolic/Electrolyte Disorders	12	8	9 - 51	35	29	8 - 43
Pulmonary Disease	143	21	15 - 32	165	26	16 - 33
Renal Failure	7	71	11 - 78	1	100	1 - 97
Severe Acute Heart Disease	89	40	31 - 54	97	35	30 - 51
Severe Chronic Heart Disease	126	17	16 - 31	113	19	16 - 32
Severe Trauma	1	0	0 - 97	1	0	0 - 98
Gastrointestinal Disease	176	2	1 - 7	207	2	1 - 7
Gynecologic Disease	28	4	0 -100	28	0	0 -100
Low-Risk Heart Disease	272	3	1 - 6	245	3	1 - 7
Musculoskeletal/Skin Conditions	274	3	1 - 7	245	2	1 - 6
Neuropsychiatric/Sensory Disease	81	5	1 - 16	95	1	0 - 9
Urologic Disease	115	3	0 - 22	88	1	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 176
Occupancy Rate (%): 80
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 118
Percent of Physicians Who Are Board Certified Specialists: 93
Interns and Residents: 0
Registered Nurses: 162
Licensed Practical Nurses: 78

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: Yes

MJH

Martha Jefferson Hospital
459 LOCUST AVENUE • CHARLOTTESVILLE, VA 22901 • (804) 293-0111

October 11, 1988

William Roper, M.D., Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington D.C. 20201

Dear Dr. Roper:

We have received the mortality data that the Health Care Financing Agency has developed on medicare patients treated here in 1987. Martha Jefferson treats a wide variety of patients, 55% of whom fall into the medicare population group.

As part of Martha Jefferson Hospital's commitment to providing appropriate quality assurance activity, we do 100% review on a concurrent basis of all hospital stays. All deaths are reviewed by Quality Assurance as will as the appropriate medical staff section. The Quality Assurance staff reports its findings to the appropriate medical sections, hospital department, as well as, the Professional Relations Committee of the Board.

All variances and quality levels are reviewed by the appropriate medical sections, trends are developed and reviewed, and any noted adverse patient occurrences are followed up through the resolution stage.

The data that you have prepared for the Martha Jefferson Hospital indicated a mortality rate within the predicted/average ranges. In fact, Martha Jefferson falls below the mid-point in 13 of the 16 categories. Our Medical Records Department has reviewed the data and some discrepancies have been noted. However, these differences do not significantly change the recorded rates.

Sincerely,

John D Holly
John D. Holly, III
President

FSB:clh

MJH
Martha Jefferson Hospital
459 LOCUST AVENUE • CHARLOTTESVILLE, VA 22901 • (804) 293-0111

October 14, 1988

Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, MD 21207

SUBJECT: Mortality Data

Dear Ms Kappert:

Attached is the corrected information on our mortality report.

As you will note, there are several discrepancies from the H.C.F.A. information.

In addition, the Martha Jefferson Hospital is a 221-bed hospital, not 128 as was indicated on the report.

Sincerely,

Frances S Bonardi
Frances S. Bonardi, RN
Vice President - Patient Services

FSB:clh

Attachment

HCFA MORTALITY DATA - 1987

DEATHS NOT FOUND ON LIST

Medical Record #	Patient's Name	Admitted	Expired	Diagnosis
[redacted]	[redacted]	[redacted]	[redacted]	431
[redacted]	[redacted]	[redacted]	[redacted]	414.0
[redacted]	[redacted]	[redacted]	[redacted]	430
[redacted]	[redacted]	[redacted]	[redacted]	584.0
[redacted]	[redacted]	[redacted]	[redacted]	820.8
[redacted]	[redacted]	[redacted]	[redacted]	183.0

MARY IMMACULATE HOSPITAL

800DENBIGH BLVD
NEWPORT NEWS, VA 23602

Medicare Hospital Provider Number: 490041

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	602	12	8 - 14	527	10	7 - 13
Cancer	24	38	24 - 63	7	57	16 - 79
Cerebrovascular Accidents	18	33	8 - 51	31	32	14 - 47
Gastrointestinal Catastrophes	3	33	4 - 86	4	0	4 - 71
Infectious Disease	5	60	6 - 78	4	50	6 - 83
Metabolic/Electrolyte Disorders	8	13	2 - 64	8	38	2 - 70
Pulmonary Disease	17	24	7 - 49	17	24	11 - 53
Renal Failure	4	25	7 - 84	2	0	1 - 92
Severe Acute Heart Disease	28	43	23 - 59	18	39	20 - 64
Severe Chronic Heart Disease	39	21	10 - 37	30	30	10 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	57	0	0 - 11	55	2	0 - 17
Gynecologic Disease	3	33	0 -100	1	0	0 -100
Low-Risk Heart Disease	58	5	0 - 26	61	2	0 - 14
Musculoskeletal/Skin Conditions	84	1	0 - 19	80	0	0 - 9
Neuropsychiatric/Sensory Disease	27	4	0 - 88	28	4	0 - 71
Urologic Disease	14	0	0 - 98	7	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	110
Occupancy Rate (%):	59
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	156
Percent of Physicians Who Are Board Certified Specialists:	81
Interns and Residents:	0
Registered Nurses:	137
Licensed Practical Nurses:	20

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MARY WASHINGTON HOSP

2300 FALL HILL AVE
FREDERICKSBURG, VA 22401

Medicare Hospital Provider Number: 490022

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,846	12	11 - 16	2,773	13	11 - 15
Cancer	126	44	32 - 53	102	57	32 - 56
Cerebrovascular Accidents	134	22	19 - 35	107	26	19 - 38
Gastrointestinal Catastrophes	24	38	14 - 55	24	46	26 - 68
Infectious Disease	78	28	21 - 47	56	30	22 - 51
Metabolic/Electrolyte Disorders	55	20	9 - 37	55	18	10 - 38
Pulmonary Disease	167	23	20 - 36	193	30	20 - 37
Renal Failure	12	25	18 - 76	9	33	9 - 74
Severe Acute Heart Disease	118	32	30 - 50	87	46	28 - 51
Severe Chronic Heart Disease	182	23	19 - 33	172	25	18 - 33
Severe Trauma	4	0	11 - 75	1	0	2 - 98
Gastrointestinal Disease	197	1	1 - 6	219	3	1 - 7
Gynecologic Disease	23	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	359	2	2 - 6	355	1	2 - 5
Musculoskeletal/Skin Conditions	228	2	1 - 6	203	3	1 - 7
Neuropsychiatric/Sensory Disease	117	1	1 - 8	138	1	1 - 6
Urologic Disease	114	4	0 - 13	111	1	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 316
Occupancy Rate (%): 79
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 116
Percent of Physicians Who Are Board Certified Specialists: 89
Interns and Residents: 0
Registered Nurses: 260
Licensed Practical Nurses: 135

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

MARYVIEW HOSPITAL

3636 HIGH STREET
PORTSMOUTH, VA 23707

Medicare Hospital Provider Number: 490017

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,088	11	9 - 13	1,956	13	9 - 14
Cancer	94	41	30 - 54	102	44	27 - 51
Cerebrovascular Accidents	107	25	16 - 34	106	29	17 - 36
Gastrointestinal Catastrophes	16	50	18 - 66	11	9	11 - 55
Infectious Disease	28	46	14 - 53	11	55	13 - 68
Metabolic/Electrolyte Disorders	30	23	12 - 47	34	21	7 - 40
Pulmonary Disease	82	26	15 - 37	81	30	14 - 37
Renal Failure	4	100	11 - 79	9	56	10 - 76
Severe Acute Heart Disease	54	35	24 - 51	61	43	24 - 50
Severe Chronic Heart Disease	127	20	14 - 29	109	21	14 - 31
Severe Trauma	5	20	8 - 76	3	0	1 - 82
Gastrointestinal Disease	188	2	1 - 6	177	7	1 - 11
Gynecologic Disease	22	0	0 -100	21	0	0 -100
Low-Risk Heart Disease	280	5	1 - 7	277	5	1 - 7
Musculoskeletal/Skin Conditions	197	3	0 - 8	173	4	0 - 12
Neuropsychiatric/Sensory Disease	60	3	0 - 21	53	2	0 - 23
Urologic Disease	78	1	0 - 17	63	2	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 298
Occupancy Rate (%): 68
Ownership/Control: Church

STAFFING

Total Number of Physicians: 209
Percent of Physicians Who Are Board Certified Specialists: 68
Interns and Residents: 0
Registered Nurses: 248
Licensed Practical Nurses: 50

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: No
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

Medicare #: 490017

October 21, 1988

MARYVIEW HOSPITAL
A Bon Secours Health Care Facility

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We have reviewed the statistical data on Medicare mortality as presented by HCFA. We are proud of both the high quality of care that is given at our hospital and the results of your statistics.

Comparison of 1986 and 1987 data shows that the overall actual mortality rate has decreased, with both years being well within the ranges for predicted mortality. Nine of the subgroups show a decrease, and each of the subgroups containing a meaningful volume are also within the predicted range for mortality. It is interesting to note that in the majority of categories, Maryview's actual mortality rate is less than the mean of the range for predicted mortality.

In addition to the individual review performed throughout the year by our Medical Staff and Medical Director, patient records from selected categories have been examined again in response to your data. It was found that different care would not have changed the outcomes, and that quality care was rendered. Our Medical Staff takes an active role in evaluating the quality of care at Maryview, and we continue to expand and improve our review efforts.

Several recent expansions at Maryview Hospital help demonstrate our commitment to administering quality services in a caring environment. Earlier this year Maryview was designated a Level II trauma center after an indepth review by the Virginia State Emergency Medical Services Advisory Board showed that our trauma certified physicians, hospital staff and equipment were able to provide that care. In addition, the Martha W. Davis Cancer Treatment Center treats patients with the latest in radiation therapy equipment.

I would like to correct several items of information which may be displayed with your data as hospital characteristics and which were taken from the 1987 American Hospital Association Annual Survey. At the time of the survey, Maryview had eight medical/surgical **ICU** beds. The availability of inpatient and outpatient **hospice** care provided support to patients with terminal illnesses. In addition, we enjoy an affiliation with the Eastern Virginia Graduate School of Medicine, a part of the Medical College of Hampton Roads. Six family practice and one radiation oncology **residents** continue their raining here on a rotational basis.

I hope that this information is useful to you in understanding Maryview Hospital's commitment to giving high quality medical care to the residents of southeastern Virginia.

Sincerely,

J. Bland Burkhardt Jr.

J. Bland Burkhardt, Jr.
Executive Vice President/CEO

3636 High Street, Portsmouth, Virginia 23707 804/398-2200

MEDICAL COLL OF VIRGINIA

401 N 12TH ST, MCV STATION BOX
RICHMOND, VA 23298

Medicare Hospital Provider Number: 490032

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,185	13	10 - 14	3,199	12	10 - 14
Cancer	207	38	31 - 50	176	30	30 - 50
Cerebrovascular Accidents	116	31	17 - 35	118	27	17 - 35
Gastrointestinal Catastrophes	28	25	24 - 60	24	50	12 - 54
Infectious Disease	26	42	15 - 54	23	39	18 - 59
Metabolic/Electrolyte Disorders	43	33	13 - 46	38	32	12 - 46
Pulmonary Disease	108	29	17 - 37	118	26	15 - 35
Renal Failure	50	18	7 - 54	61	15	6 - 54
Severe Acute Heart Disease	118	27	27 - 46	114	21	29 - 47
Severe Chronic Heart Disease	136	24	17 - 33	134	20	17 - 32
Severe Trauma	14	57	9 - 61	21	29	10 - 53
Gastrointestinal Disease	98	5	0 - 16	115	3	1 - 9
Gynecologic Disease	18	0	0 -100	22	0	0 -100
Low-Risk Heart Disease	482	5	2 - 7	410	4	2 - 7
Musculoskeletal/Skin Conditions	267	1	0 - 5	294	1	0 - 5
Neuropsychiatric/Sensory Disease	222	4	1 - 9	237	3	0 - 8
Urologic Disease	117	0	0 - 7	73	0	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	895
Occupancy Rate (%):	80
Ownership/Control:	State Government

STAFFING

Total Number of Physicians:	517
Percent of Physicians Who Are Board Certified Specialists:	77
Interns and Residents:	443
Registered Nurses:	1,064
Licensed Practical Nurses:	323

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

Medical College of Virginia Hospitals
Virginia Commonwealth University

October 21, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

I am writing to share my comments regarding the release of the 1987 Medicare Mortality Data. While there has been some refinement in the methodology to generate this data, there are still major shortcomings. Specific concerns include a lack of severity of illness adjustment, a lack of accounting for nursing home transfers, use of a limited number of comorbidities, the inclusion of deaths unrelated to hospitalization, and inaccuracies in the data. These concerns echo those of the industry. Releasing information of this type to the public with these significant flaws continues to unfairly place hospital reputations at risk.

These concerns are not based on our own performance. Again, in 1987, the Medical College of Virginia Hospital's (MCVH) actual mortality rates are well within all of the predicted ranges. Our concerns are about the flaws in the methodology and the risk of either misinterpretation or over reliance on the data as a measure of quality of care. We have made a strong commitment to our Quality Assurance programs which go beyond mortality review and believe that these internal mechanisms will insure that MCVH patients will receive the very best of care.

I would also like to clarify some of the descriptive statistics provided in this year's publication. At present there are 539 full-time physicians on the staff and 476 of these are board certified, which is a rate of 88%. MCVH also provides all of the specialty services listed including a Level I Trauma Center, a full range of organ transplant services, and a Hospice Program.

Thank you for this opportunity to comment.

Sincerely,

Peter Rapp

Peter Rapp
Administrator

MEMORIAL HOSP
142 S MAIN ST
DANVILLE, VA 24541

Medicare Hospital Provider Number: 490075

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,253	15	11 - 15	3,497	13	10 - 14
Cancer	119	45	29 - 51	120	44	28 - 51
Cerebrovascular Accidents	136	25	17 - 34	148	26	18 - 34
Gastrointestinal Catastrophes	43	28	17 - 49	44	23	18 - 49
Infectious Disease	36	39	21 - 55	36	33	15 - 49
Metabolic/Electrolyte Disorders	101	30	15 - 40	137	20	12 - 34
Pulmonary Disease	160	31	16 - 34	165	27	14 - 31
Renal Failure	43	26	9 - 57	40	22	14 - 63
Severe Acute Heart Disease	175	36	29 - 46	171	37	28 - 45
Severe Chronic Heart Disease	193	34	16 - 31	183	28	17 - 32
Severe Trauma	6	0	4 - 59	4	0	5 - 72
Gastrointestinal Disease	231	5	1 - 8	257	3	1 - 7
Gynecologic Disease	30	0	0 -100	38	3	0 -100
Low-Risk Heart Disease	316	2	2 - 6	353	4	2 - 7
Musculoskeletal/Skin Conditions	250	3	1 - 7	296	3	1 - 6
Neuropsychiatric/Sensory Disease	109	1	1 - 8	117	2	0 - 9
Urologic Disease	166	2	0 - 8	165	2	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 398
Occupancy Rate (%): 71
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 100
Percent of Physicians Who Are Board Certified Specialists: 75
Interns and Residents: 0
Registered Nurses: 214
Licensed Practical Nurses: 166

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

MEMORIAL HOSPITAL MARTINSVILLE

PO BOX 4788
MARTINSVILLE, VA 24112

Medicare Hospital Provider Number: 490079

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,840	13	9 - 13	1,984	13	8 - 13
Cancer	41	59	31 - 63	56	57	26 - 55
Cerebrovascular Accidents	78	26	15 - 35	66	36	15 - 39
Gastrointestinal Catastrophes	22	36	19 - 61	16	38	11 - 59
Infectious Disease	18	28	15 - 57	16	50	16 - 64
Metabolic/Electrolyte Disorders	49	47	16 - 49	44	25	12 - 43
Pulmonary Disease	106	28	15 - 35	131	28	16 - 34
Renal Failure	6	17	16 - 82	14	71	18 - 75
Severe Acute Heart Disease	64	45	24 - 50	72	49	26 - 50
Severe Chronic Heart Disease	110	27	14 - 32	109	21	13 - 30
Severe Trauma	7	14	6 - 65	6	33	4 - 74
Gastrointestinal Disease	182	2	1 - 7	176	2	1 - 7
Gynecologic Disease	14	0	0 -100	23	0	0 -100
Low-Risk Heart Disease	177	3	1 - 8	160	4	1 - 9
Musculoskeletal/Skin Conditions	160	2	0 - 8	178	3	1 - 8
Neuropsychiatric/Sensory Disease	61	3	0 - 20	103	2	0 - 11
Urologic Disease	163	2	0 - 10	174	3	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	207
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	64
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	128
Licensed Practical Nurses:	90

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	Yes

Memorial Hospital
of Martinsville & Henry County

October 21, 1988

William L. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington, DC 20201

Dear Dr. Roper:

This letter is in reply to your letter of September 15, 1988, concerning planned publication of selected 1987 Medicare patient mortality information for patients treated in this hospital. Memorial Hospital of Martinsville and Henry County is the only hospital in its city/county primary service area of approximately 77,000 population. It also serves patients from four surrounding counties, especially Patrick County, Virginia, to the West, which has 18,210 population. MHMHC is categorized as a Medicare Rural Referral Hospital because of its inpatient volume, patient mix, and number and types of medical staff specialists. It operates an emergency department, chemotherapy cancer program, a hospice program, an obstetrical and pediatric service, a psychiatric unit, and other services generally found in full service community hospitals. There are two intermediate care nursing home facilities in Martinsville, with a total licensed capacity of 323 beds, and a similar facility in Stuart, Patrick County, Virginia, with 120 licensed beds. The point is that there is a concentration of elderly patients in this area, many of whom come to this hospital when hospitalization is required.

We support your intention to begin to develop measurements of quality for hospitals. We agree that while the information on hospital mortality rates is interesting and somewhat useful, until HCFA has developed additional statistical measures to deal with complex issues, such as severity of illness, the use of the information by itself to make judgments about the quality of care in this hospital or to compare this hospital with other hospitals, would not be valid. In addition to severity, some of the other limitations in uses of the information include effects of low education and income, effects of certain stressful occupations, effects of geographic environment, lifestyle considerations, and chance. We intend to review the HCFA report in our Medical Staff Quality Assessment Committee reviews and use it as a small element in this hospital's ongoing efforts to assure and enhance quality of care.

As reflected in the attachments, there are some inaccuracies in the data which was attached to your letter. For example, one patient had been transferred to a teaching hospital. Thus, that patient's death should appear in the teaching hospital's statistics. This would result in the correct number of deaths being 357 rather than 358. Further, there were 36 patients, for whom your listing shows admission and discharge data, who were later readmitted and died during the second period of hospitalization. In 18 of these 36 cases, the principal diagnostic code of the second admission is not identical to the principal diagnostic code of the original admission. In some cases, this illustrates that the cause of death may be due to trauma, suicide, and other reasons not directly related to the principal diagnosis of the original admission. There were also 25 patients whose deaths occurred in this hospital's emergency department and 12 patients who were dead upon arrival at this hospital's emergency department. We have not had time to analyze whether the cause of death was directly related to the principal diagnosis of the original visit. Based upon the corrected data discussed above, I could hypothesize that approximately half of the 37 deaths in the emergency department and DOA's had a cause of death not directly related to the principal diagnostic code of the original admission. We also note that for three patients, the date of death was incorrect. The number of beds (AHA 1986) is listed as 135. This must reflect our average daily census, since the licensed bed capacity of this hospital is 264 beds. This statistic should be accurately defined.

Of significance to us is the MHMHC case mix by age and the diagnostic category grouping reflecting cause of death. The mix by age is as follows: age 90+ - 30 deaths; ages 80-89 - 103 deaths; ages 70-79 - 153 deaths; ages 50-69 - 68 deaths; and less that age 50 - 3 deaths. A review of the causes of death as reflected in the diagnostic category grouping and of the case mix by age reflects that the majority of deaths occurred in elderly, very sick patients.

We are happy to note that all of the actual mortality rates by diagnostic category for MHMHC fell within the range of predicted mortality rates. We feel that all deaths are explainable by the patient's diagnosis, age, severity of illness, and by other environmental and lifestyle factors common to our rural location. We feel that MHMHC offers an outstanding quality of care to the patients it serves. Your report will be used in ongoing quality assurance efforts; but it in no way, in its present format, can be used to measure the performance of this hospital or to compare this hospital's care with that given by others.

Sincerely,

Clyde L. Britt

Clyde L. Britt
Executive Director

CLB:jc
Attachments

METROPOLITAN HOSPITAL

700 WEST GRACE ST
RICHMOND, VA 23220

Medicare Hospital Provider Number: 490124

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	772	13	10 - 16	760	9	9 - 14
Cancer	22	50	23 - 65	27	44	26 - 65
Cerebrovascular Accidents	28	32	13 - 48	24	25	10 - 46
Gastrointestinal Catastrophes	11	45	15 - 70	7	29	6 - 70
Infectious Disease	22	55	20 - 62	23	17	22 - 57
Metabolic/Electrolyte Disorders	40	30	9 - 43	30	10	10 - 39
Pulmonary Disease	33	30	13 - 45	42	21	13 - 40
Renal Failure	4	25	7 - 83	9	56	11 - 77
Severe Acute Heart Disease	27	44	25 - 62	15	33	15 - 61
Severe Chronic Heart Disease	37	24	12 - 41	34	9	12 - 35
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	61	2	1 - 12	54	4	0 - 21
Gynecologic Disease	5	20	0 -100	8	0	0 -100
Low-Risk Heart Disease	89	3	1 - 12	107	2	1 - 9
Musculoskeletal/Skin Conditions	50	2	0 - 18	80	0	0 - 7
Neuropsychiatric/Sensory Disease	48	0	0 - 22	45	0	0 - 22
Urologic Disease	22	5	1 - 36	22	5	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	180
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

MONTGOMERY REGIONAL HOSPITAL

ROUTE 460 SOUTH
BLACKSBURG, VA 24060

Medicare Hospital Provider Number: 490110

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	973	10	9 - 14	1,018	11	8 - 13
Cancer	19	42	24 - 67	16	63	27 - 73
Cerebrovascular Accidents	34	35	16 - 48	26	12	14 - 42
Gastrointestinal Catastrophes	3	67	9 - 90	4	50	6 - 83
Infectious Disease	6	0	14 - 64	8	50	13 - 75
Metabolic/Electrolyte Disorders	17	29	5 - 53	31	23	7 - 42
Pulmonary Disease	81	20	15 - 35	61	25	14 - 38
Renal Failure	1	100	1 - 97	0	-	-
Severe Acute Heart Disease	32	16	24 - 52	29	28	22 - 55
Severe Chronic Heart Disease	46	24	15 - 40	64	20	13 - 34
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	109	6	1 - 13	133	5	1 - 11
Gynecologic Disease	5	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	93	2	1 - 10	108	5	1 - 12
Musculoskeletal/Skin Conditions	104	3	0 - 12	90	2	0 - 13
Neuropsychiatric/Sensory Disease	30	0	0 - 25	34	3	0 - 67
Urologic Disease	35	3	0 - 58	30	3	0 - 77

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	115
Occupancy Rate (%):	64
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	43
Percent of Physicians Who Are Board Certified Specialists:	93
Interns and Residents:	0
Registered Nurses:	87
Licensed Practical Nurses:	30

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MOUNT VERNON HOSP

2501 PARKERS LANE
ALEXANDRIA, VA 22306

Medicare Hospital Provider Number: 490122

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	981	11	9 - 14	965	9	8 - 13
Cancer	29	41	28 - 64	26	54	23 - 62
Cerebrovascular Accidents	28	25	12 - 45	35	20	12 - 41
Gastrointestinal Catastrophes	4	25	5 - 80	8	25	14 - 72
Infectious Disease	10	60	15 - 71	2	0	2 - 88
Metabolic/Electrolyte Disorders	21	14	8 - 44	23	17	6 - 44
Pulmonary Disease	62	24	16 - 39	39	18	16 - 43
Renal Failure	1	0	0 -100	2	0	0 - 97
Severe Acute Heart Disease	29	31	22 - 56	34	38	23 - 56
Severe Chronic Heart Disease	60	18	12 - 33	48	10	16 - 35
Severe Trauma	2	0	1 - 90	1	100	0 - 98
Gastrointestinal Disease	74	1	1 - 10	68	1	1 - 11
Gynecologic Disease	9	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	98	2	2 - 9	93	2	1 - 10
Musculoskeletal/Skin Conditions	106	3	0 - 12	95	2	1 - 10
Neuropsychiatric/Sensory Disease	31	6	0 - 61	29	3	0 - 81
Urologic Disease	26	8	0 - 92	44	2	0 - 37

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	211
Occupancy Rate (%):	76
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	165
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	287
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MOUNT VERNON HOSPITAL
FAIRFAX HOSPITAL SYSTEM

Mount Vernon Hospital
2501 Parker's Lane
Alexandria, Virginia 22306
703 664-7000

Stephen C. Rupp
Vice President, Fairfax Hospital System
Administrator, Mount Vernon Hospital

Hospital I.D. #490122

18 October 1988

Health Care Financing Administration
Health Standards and Quality Bureau
2-3-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Mrs. Sandra Kappert

Dear Mrs. Kappert:

As Administrator and Medical Staff President of Mount Vernon Hospital we support efforts that can further consumer understanding of the health care delivery system and the quality of the care they receive.

The HCFA mortality data is one measure that can offer some insight into evaluating health care delivery systems. It does concentrate on one segment, the Medicare population, and therefore is inadequate in addressing other age groups with significantly different health concerns.

When considered with other information sources though, such as other professional citations, as well as physician and patient recommendations we do feel that the HCFA data can be a helpful information piece in an overall evaluation of health care providers.

In responding to the report we would first like to verify the data and make the following observations:

Data Verification/Identified Errors

- The HCFA data indicates that Mount Vernon Hospital treated 981 Medicare patients in 1987. Mount Vernon Hospital (MVH) records show 1,662 Medicare cases treated during that period. The discrepancy could be partly due to the fact that HCFA only includes the last admission for those patients hospitalized more than once during the year.
- All patients listed by HCFA have been verified with the exception of errors attached. (See Attachment A)
- Mount Vernon Hospital characteristics for 1987 are corrected as follows:

Beds (#)- set up and staffed	211
Occupancy rate (%)	75%
Total # of physicians	180
% of physicians who are board-certified specialists	83%
Registered nurses per occupied bed	0.9

Hospital I.D. #490122

Response and Comments -
1987 HCFA Mortality Data - Mount Vernon Hospital, Alexandria, VA

Data Interpretation

We would like to note that the actual mortality rates at Mount Vernon Hospital fall within the predicted range in all diagnostic categories. Aside from noting the hospital's performance overall we would like to make these additional observations:

1. In verifying the data Mount Vernon Hospital (MVH) found the HCFA data to be more complete and a better correlation with our records than in past years.

2. One deficit noted is that HCFA data does not reflect the level of acuity of these patients. Like most hospitals Mount Vernon Hospital is experiencing a higher level of acuity with Medicare patients which is influencing the mortality data. We would recommend the inclusion of some type of acuity reference in future HCFA data reports which will make the information more meaningful to the hospital and the public.

3. Of the 56 verified as deaths after discharge

    - Twenty-two patients were discharged to nursing homes, twenty-two patients were at home, nine were under home health care, one was receiving hospice care and two were discharged to another acute care hospital.

    - Other than the six patients with advanced stages of cancer and seven with chronic pulmonary disease there is no diagnostically identified pattern of patients dying after discharge.

4. As part of its quality assurance program Mount Vernon Hospital routinely reviews all deaths in the hospital, not just Medicare cases. These deaths are reviewed by physicians either at the committee or departmental level. Although the Medicare cases had all been reviewed earlier, Mount Vernon Hospital reexamined the cases identified by HCFA and is satisfied that the quality of care provided was appropriate.

    Mount Vernon Hospital is not routinely informed of death post-discharge. Therefore it was not capable of verifying or reviewing the cause of those deaths HCFA reports as occurring after discharge.

We appreciate the opportunity and the time to comment on this data.

Sincerely yours,

Steve Rupp

Stephen C. Rupp
Administrator

Laurence J. Clark, M.D.
Medical Staff President

NATL ORTHOPAEDIC&REHAB HOSP

2455 ARMY-NAVY DR
ARLINGTON, VA 22206

Medicare Hospital Provider Number: 490014

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	770	6	4 - 9	735	6	4 - 9
Cancer	3	100	11 - 84	4	25	1 - 83
Cerebrovascular Accidents	21	24	9 - 47	19	32	10 - 52
Gastrointestinal Catastrophes	3	0	2 - 81	2	0	0 - 92
Infectious Disease	9	0	12 - 51	3	0	2 - 81
Metabolic/Electrolyte Disorders	6	33	2 - 76	2	0	0 - 92
Pulmonary Disease	27	22	13 - 46	33	21	9 - 40
Renal Failure	2	50	1 - 94	2	100	7 - 92
Severe Acute Heart Disease	20	25	19 - 58	17	41	18 - 63
Severe Chronic Heart Disease	7	14	3 - 64	10	20	4 - 58
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	25	4	0 - 60	20	0	0 - 61
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	60	5	0 - 26	40	0	0 - 15
Musculoskeletal/Skin Conditions	305	0	0 - 4	329	1	0 - 4
Neuropsychiatric/Sensory Disease	20	0	0 - 71	12	0	0 - 98
Urologic Disease	4	0	0 -100	7	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	140
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	190
Percent of Physicians Who Are Board Certified Specialists:	42
Interns and Residents:	0
Registered Nurses:	146
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NEWPORT NEWS GENL HOSPITAL

5100 MARSHALL AVE
NEWPORT NEWS, VA 23605

Medicare Hospital Provider Number: 490035

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	328	10	8 - 15	349	14	8 - 16
Cancer	11	18	15 - 63	10	20	22 - 72
Cerebrovascular Accidents	15	13	8 - 47	22	23	14 - 50
Gastrointestinal Catastrophes	1	0	0 - 98	2	0	2 - 89
Infectious Disease	4	50	3 - 82	7	29	8 - 71
Metabolic/Electrolyte Disorders	13	15	10 - 55	18	44	5 - 54
Pulmonary Disease	6	0	3 - 58	5	0	2 - 66
Renal Failure	9	33	12 - 76	3	67	4 - 87
Severe Acute Heart Disease	15	53	18 - 65	11	73	22 - 73
Severe Chronic Heart Disease	12	17	4 - 52	16	13	5 - 43
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	31	3	0 - 37	22	5	0 - 95
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	38	3	0 - 24	48	4	0 - 25
Musculoskeletal/Skin Conditions	36	6	0 - 48	19	11	0 - 88
Neuropsychiatric/Sensory Disease	2	50	0 -100	6	0	0 -100
Urologic Disease	10	0	0 -100	9	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	94
Occupancy Rate (%):	52
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	42
Percent of Physicians Who Are Board Certified Specialists:	12
Interns and Residents:	0
Registered Nurses:	38
Licensed Practical Nurses:	18

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NORFOLK COMM HOSP

2539 CORPREW AVE
NORFOLK, VA 23504

Medicare Hospital Provider Number: 490030

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	546	12	9 - 15	591	10	8 - 14
Cancer	24	63	29 - 68	18	17	20 - 58
Cerebrovascular Accidents	31	10	14 - 38	30	7	15 - 37
Gastrointestinal Catastrophes	2	0	3 - 88	0	-	-
Infectious Disease	5	100	11 - 68	6	17	6 - 69
Metabolic/Electrolyte Disorders	40	20	9 - 40	31	19	8 - 42
Pulmonary Disease	10	30	7 - 62	19	26	4 - 48
Renal Failure	5	40	13 - 87	10	30	10 - 73
Severe Acute Heart Disease	13	15	16 - 58	19	37	18 - 60
Severe Chronic Heart Disease	34	15	10 - 36	35	17	9 - 37
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	28	7	0 - 90	45	7	0 - 43
Gynecologic Disease	5	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	41	0	0 - 15	69	3	1 - 13
Musculoskeletal/Skin Conditions	54	0	0 - 21	47	2	0 - 23
Neuropsychiatric/Sensory Disease	14	0	0 - 91	15	0	0 - 99
Urologic Disease	33	0	0 - 63	31	0	0 - 23

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#): 202
Ownership/Control: Private, Non-profit

STAFFING

Interns and Residents: 4
Registered Nurses: 54
Licensed Practical Nurses: 41

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

NORTHAMPTON ACCOMACK MEMORIAL HOSPIT

NASSAWADOX, VA 23413

Medicare Hospital Provider Number: 490037

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,287	15	11 - 16	1,315	15	10 - 15
Cancer	45	62	30 - 60	58	59	28 - 56
Cerebrovascular Accidents	51	29	14 - 40	82	28	16 - 37
Gastrointestinal Catastrophes	12	42	14 - 67	11	45	14 - 69
Infectious Disease	14	36	14 - 63	13	46	12 - 64
Metabolic/Electrolyte Disorders	18	39	9 - 55	27	30	8 - 47
Pulmonary Disease	75	33	16 - 40	69	28	13 - 37
Renal Failure	6	100	10 - 69	8	63	12 - 79
Severe Acute Heart Disease	84	31	28 - 50	61	43	27 - 53
Severe Chronic Heart Disease	69	17	15 - 34	48	15	14 - 36
Severe Trauma	1	0	3 - 98	0	-	-
Gastrointestinal Disease	97	2	1 - 10	109	3	1 - 10
Gynecologic Disease	2	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	151	1	2 - 6	128	2	2 - 9
Musculoskeletal/Skin Conditions	85	2	1 - 11	98	7	0 - 22
Neuropsychiatric/Sensory Disease	48	6	0 - 54	39	8	0 - 75
Urologic Disease	49	4	0 - 60	62	10	0 - 32

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	158
Occupancy Rate (%):	58
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	27
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	31
Licensed Practical Nurses:	78

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

NORTHERN VA DOCTORS HOSP

601 CARLIN SPRINGS RD
ARLINGTON, VA 22204

Medicare Hospital Provider Number: 490073

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,444	11	9 - 14	1,316	11	9 - 14
Cancer	28	54	25 - 62	36	58	25 - 59
Cerebrovascular Accidents	58	26	15 - 39	46	28	16 - 43
Gastrointestinal Catastrophes	12	42	10 - 64	7	29	8 - 71
Infectious Disease	20	15	16 - 52	20	20	20 - 59
Metabolic/Electrolyte Disorders	33	30	11 - 46	27	19	12 - 46
Pulmonary Disease	78	29	17 - 40	59	22	14 - 38
Renal Failure	10	60	13 - 76	8	50	12 - 79
Severe Acute Heart Disease	62	26	28 - 52	52	31	26 - 53
Severe Chronic Heart Disease	78	26	14 - 35	70	24	13 - 35
Severe Trauma	0	-	-	3	0	2 - 80
Gastrointestinal Disease	112	1	1 - 7	113	4	1 - 11
Gynecologic Disease	20	0	0 - 98	8	0	0 -100
Low-Risk Heart Disease	170	3	1 - 8	161	2	2 - 8
Musculoskeletal/Skin Conditions	128	1	1 - 7	107	6	0 - 16
Neuropsychiatric/Sensory Disease	69	4	0 - 23	59	0	0 - 10
Urologic Disease	73	1	0 - 15	75	0	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	198
Occupancy Rate (%):	(not available)
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	(not available)
Burn Unit:	(not available)
Medical/Surgical Intensive Care:	(not available)
Cardiac Intensive Care:	(not available)
Organ Transplant Service:	(not available)
Hospice Care:	(not available)

NORTON COMMUNITY HOSP

100 15TH ST NW
NORTON, VA 24273

Medicare Hospital Provider Number: 490001

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	891	11	9 - 14	877	12	9 - 14
Cancer	17	59	28 - 74	8	88	30 - 82
Cerebrovascular Accidents	22	36	10 - 50	19	32	12 - 54
Gastrointestinal Catastrophes	6	33	5 - 73	2	50	8 - 98
Infectious Disease	6	67	8 - 75	5	60	10 - 81
Metabolic/Electrolyte Disorders	26	23	10 - 47	26	15	16 - 50
Pulmonary Disease	52	29	14 - 40	53	32	19 - 46
Renal Failure	3	100	18 - 95	2	0	7 - 91
Severe Acute Heart Disease	41	44	23 - 54	40	40	22 - 53
Severe Chronic Heart Disease	30	40	14 - 49	33	36	14 - 47
Severe Trauma	0	-	-	1	0	0 - 97
Gastrointestinal Disease	89	2	1 - 10	76	3	1 - 12
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	147	4	1 - 9	131	2	2 - 8
Musculoskeletal/Skin Conditions	79	1	0 - 11	70	0	0 - 8
Neuropsychiatric/Sensory Disease	25	0	0 - 64	25	0	1 - 24
Urologic Disease	45	0	0 - 53	45	4	0 - 53

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 129
Occupancy Rate (%): 50
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 24
Percent of Physicians Who Are Board Certified Specialists: 42
Interns and Residents: 0
Registered Nurses: 46
Licensed Practical Nurses: 31

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: Yes

PAGE MEMORIAL HOSPITAL

200 MEMORIAL DRIVE
LURAY, VA 22835

Medicare Hospital Provider Number: 490047

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	321	16	12 - 20	316	12	10 - 18
Cancer	7	71	22 - 83	9	78	19 - 72
Cerebrovascular Accidents	7	57	11 - 74	8	13	11 - 62
Gastrointestinal Catastrophes	2	50	2 - 92	0	-	-
Infectious Disease	1	100	0 - 99	2	0	1 - 90
Metabolic/Electrolyte Disorders	5	40	4 - 78	15	7	4 - 43
Pulmonary Disease	47	17	15 - 39	40	13	16 - 40
Renal Failure	2	100	5 - 90	2	100	3 - 89
Severe Acute Heart Disease	18	33	22 - 65	15	47	20 - 68
Severe Chronic Heart Disease	36	8	17 - 38	24	13	11 - 41
Severe Trauma	2	100	4 - 89	0	-	-
Gastrointestinal Disease	31	13	0 - 60	31	3	0 - 56
Gynecologic Disease	4	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	35	0	0 - 22	36	3	0 - 30
Musculoskeletal/Skin Conditions	19	5	0 - 84	17	6	0 - 97
Neuropsychiatric/Sensory Disease	1	0	0 -100	5	0	0 -100
Urologic Disease	5	20	0 -100	6	17	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	34
Occupancy Rate (%):	47
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	0
Registered Nurses:	21
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PORTSMOUTH GENERAL HOSP

900 LECKIE ST
PORTSMOUTH, VA 23704

Medicare Hospital Provider Number: 490074

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,289	13	10 - 15	1,278	15	10 - 15
Cancer	42	33	22 - 53	24	63	26 - 65
Cerebrovascular Accidents	61	28	13 - 37	63	19	17 - 38
Gastrointestinal Catastrophes	10	20	13 - 65	15	33	12 - 60
Infectious Disease	41	46	22 - 55	63	43	23 - 52
Metabolic/Electrolyte Disorders	39	21	12 - 43	37	22	9 - 41
Pulmonary Disease	52	37	12 - 40	74	45	14 - 39
Renal Failure	8	25	8 - 73	5	60	6 - 81
Severe Acute Heart Disease	42	57	23 - 54	40	52	22 - 53
Severe Chronic Heart Disease	84	19	15 - 33	60	28	13 - 37
Severe Trauma	0	-	-	3	33	1 - 90
Gastrointestinal Disease	90	4	0 - 16	96	3	1 - 12
Gynecologic Disease	11	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	154	1	1 - 6	149	5	1 - 10
Musculoskeletal/Skin Conditions	96	3	0 - 16	95	6	0 - 18
Neuropsychiatric/Sensory Disease	26	0	0 - 64	28	7	0 - 89
Urologic Disease	58	0	0 - 18	49	2	0 - 31

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	193
Occupancy Rate (%):	70
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	178
Percent of Physicians Who Are Board Certified Specialists:	76
Interns and Residents:	0
Registered Nurses:	148
Licensed Practical Nurses:	77

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Portsmouth
General Hospital

[illegible] Parkway
[illegible] Virginia 23704
[illegible]

Medicare Provider Number: 49-0074

October 21, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

Thank you for the opportunity to comment on Portsmouth General Hospital's 1987 Medicare Hospital Mortality Information. We have reviewed the mortality information provided and feel there is some error on the categorizing of patient deaths in the area of severe acute heart disease. Four of the deceased patients have primary diagnoses for the cause of death that are not cardiac related. Their names, medical record numbers, and primary diagnoses appear on the attached page.

Portsmouth General Hospital feels that pulmonary embolisms (Code 415.1) and shock (Code 785.5) do not belong in the severe heart acute disease category. Two of the four questionable deaths had diagnoses of pulmonary embolism. Yet, examination of the medical record reveals no cardiac treatment but pulmonary treatment. A pulmonary embolism does not always constitute cardiac specific complications so it should be moved to the pulmonary category. We feel the same applies to shock and it should be moved to the all other diseases category.

We have also found [redacted]. This case should also be moved to its appropriate category.

We encourage HCFA to factor severity of illness into the mortality methodology. The severity of illness found on many of the patients' medical records gives a better interpretation of the mortality information to those reviewing the data. We also feel the actual number of admissions the patient had during the year of their death would also help interpret the data.

Mrs. Sandra Kappert
October 21, 1988
Page 2

The socioeconomic conditions of the hospital's service area should be considered in the mortality methodology. Portsmouth's 1988 median household income is projected to be $21,706. This is substantially lower than the household incomes of the neighboring cities of Chesapeake and Virginia Beach, which are projected at $29,867 and $32,757. Furthermore, Portsmouth has a higher black population than most of the surrounding cities. The 1988 projections show Portsmouth's population being 46.9% black, compared to 31.9% and 13.1% found in the surrounding cities of Chesapeake and Virginia Beach. Both of these factors contribute to the general health and welfare of the people Portsmouth General serves.

We would also like to correct the Hospital Characteristics section of the report. Portsmouth General Hospital reported 173 beds in its 1986 AHA survey. The percent of board certified specialists was 64%. The RN/bed ratio is .83 and the LPN/bed ratio is .38.

Thank you for your consideration. We hope HCFA will make the suggested changes to our mortality information. If you have any questions regarding our comments please contact Jeff Karako at (804) 496-6250.

Sincerely,

Richard B. Maxwell III
Chief Operating Officer

Attachment

Attachment to letter to
Mrs. Sandra Kappert
October 21, 1988
Page 3

Medicare Provider Number: 49-0074

Portsmouth General Hospital

Portsmouth General Hospital feels the following patient deaths should be reexamined and moved from severe acute heart disease to the suggested areas.

Patient	Medical Record #		Primary Dx
[redacted]	[redacted]	415.1	Pulmonary Embolism
[redacted]	[redacted]	415.1	Pulmonary Embolism
[redacted]	[redacted]	785.5	Shock
[redacted]	[redacted]	583.9	End Stage Renal Failure

[redacted] and [redacted] deaths should be categorized under pulmonary disease due to the possibility that the embolism would not necessarily affect the heart to be the primary cause of death. [redacted] should be under the all other diseases category and [redacted] should be under the renal failure category. We ask that you reexamine the primary diagnosis code groupings and adjust Portsmouth General's mortality data accordingly.

POTOMAC HOSPITAL

2300 OPITZ BOULEVARD
WOODBRIDGE, VA 22191

Medicare Hospital Provider Number: 490113

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	629	13	8 - 14	713	9	8 - 13
Cancer	21	33	18 - 59	12	25	10 - 59
Cerebrovascular Accidents	25	12	12 - 41	19	5	15 - 42
Gastrointestinal Catastrophes	5	60	9 - 80	10	40	13 - 69
Infectious Disease	1	100	2 - 98	12	25	11 - 61
Metabolic/Electrolyte Disorders	17	29	6 - 53	12	17	2 - 58
Pulmonary Disease	25	48	11 - 50	44	14	13 - 36
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	19	53	21 - 64	28	29	22 - 56
Severe Chronic Heart Disease	46	33	10 - 38	43	21	11 - 37
Severe Trauma	0	-	-	4	25	2 - 82
Gastrointestinal Disease	59	0	1 - 9	55	2	0 - 17
Gynecologic Disease	4	0	0 -100	5	20	0 -100
Low-Risk Heart Disease	96	4	1 - 13	84	6	0 - 18
Musculoskeletal/Skin Conditions	43	5	0 - 25	59	0	0 - 13
Neuropsychiatric/Sensory Disease	23	0	0 - 30	33	0	0 - 24
Urologic Disease	23	4	0 -100	27	0	0 - 40

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	158
Occupancy Rate (%):	61
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	113
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	139
Licensed Practical Nurses:	26

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Potomac Hospital
Corporation

Medicare # 49-0113

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Re: Mortality Data for Potomac Hospital, #49-0113

Dear Mrs. Kappert:

Potomac Hospital is pleased to be given the opportunity to respond to the Health Care Financing Administration's calculated mortality rates for Medicare patients admitted to our facility in 1987.

The delivery of quality patient care is the primary concern of Potomac Hospital's Governing Board, Administration, and Medical Staff. A comprehensive and systematic quality assurance program monitors all of our patients' care. This program is continually reviewed, evaluated, and updated to meet the demands of the rapidly changing health care industry. We at Potomac Hospital pride ourselves in delivering quality, cost-effective services to the patients of our community.

Mortality data are only a small part of our comprehensive quality assurance program. Physician or peer review of all deaths has been part of the patient care evaluation process since Potomac Hospital opened 16 years ago. These data by themselves in no way measure the quality of care provided to our hospital. They can help to identify and suggest areas for more in-depth review. Along with our quality assessment information, these data are evaluated on a regular basis to help assess trends and variations from standards. At our facility, any indication of a potential quality assurance problem leads to an immediate and thorough review with corrective action taken as necessary.

Professional members of our Quality Assurance Department have reviewed, in depth, the cases listed in the data compiled by HCFA. All but one of the 82 patients were in the end stages of their disease (i.e., patients for whom no further treatment was available or for whom no further treatment was desired by the patient or the patient's family). The single patient in the Infectious Disease category [redacted] As the sole community hospital serving this area, we often provide the support systems for patients and families dealing with the final stage of an illness.

The methodology used by HCFA to calculate the data has significant limitations as HCFA themselves acknowledge. They do not recommend that this information be used by itself to make judgments about the quality of care a hospital provides. They admit that the ability of this model to detect differences in the quality of care provided has never been proven. It is suspect for several reasons. First, the predicted range is calculated by assuming all patients are the same. The severity of illess or how sick the patient was at the time of admission is not measured. Being outside the range simply means that it is likely there is something that is not average about your hospital. The patients may not be average or the care received may not be average. This is evidenced by comparing the 1987 predicted ranges to those of 1986. Our patient composition mix changed so that the ranges in many categories increased. Second, the small numbers in many of the diagnostic categories distort the predicted ranges and the actual mortality rates. Third, it should be noted that not all Medicare admissions for 1987 were counted. Only the patient's last admission for the year is used and this tends to skew the percentage of actual and predicted death rates. The likelihood of a patient dying the last time he or she is admitted to a hospital is, by definition, certainly greater than on previous admissions. Statistical methods for measuring quality are still, at best, an adjunct to medical review and should be used only to focus this review.

In conclusion, I would like to reemphasize that Potomac Hospital is committed to the provision of quality patient care. Even through we are pleased that our mortality rates fall in the predicted ranges, this cannot be used as a valid measure of hospital performance. Our hospital, in conjunction with the American Hospital Association, the Joint Commission on Accreditation of Healthcare Organizations, and other concerned groups and individuals, continues to work toward defining better methods for evaluating hospital care and services. Potomac Hospital is committed to this process, as we and the public need better methods of measuring the quality of care provided to our nation's hospitals.

Potomac Hospital is proud of the quality of care it provides. I would be delighted to discuss the quality of care provided at Potomac Hospital, our Quality Assurance Program, and these mortality data with any interested individuals.

Sincerely,

Wm M. Moss
William M. Moss
President

WMM:gcw:nmp
Wang #6382J

cc: Michael E. Cohen, M.D.
Chief of Medical Staff

Potomac Hospital
Corporation

Medicare # 49-0113

October 21, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

Several items on the Hospital Characteristics System of the Medicare Hospital Mortality Information Sheet for Potomac Hospital are incorrect.

I have printed the correct information below as from the 1987 AHA Survey as I understand this is the data base you will use. Please ensure this data is correct when published. Thank you.

Beds (#): 153

Occupancy (%): 64

Staffing:

Total Physicians:	113
Percent Physicians Board Certified:	72
Registered Nurses Per Bed:	1.07
Licensed Practical Nurses Per Bed:	0.20

Specialty Service:

Organ Transplant: No

Sincerely,

Wm M. Moss

William M. Moss

WMM:nmp
Wang #6391J

PRINCE WILLIAM HOSP

8700 SUDLEY ROAD
MANASSAS, VA 22110

Medicare Hospital Provider Number: 490045

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	878	11	9 - 14	912	13	9 - 15
Cancer	24	29	18 - 56	24	42	23 - 63
Cerebrovascular Accidents	32	22	12 - 42	41	12	17 - 39
Gastrointestinal Catastrophes	9	56	15 - 74	14	29	9 - 58
Infectious Disease	9	33	7 - 66	12	50	11 - 64
Metabolic/Electrolyte Disorders	24	29	8 - 48	20	35	10 - 54
Pulmonary Disease	50	24	13 - 39	70	34	12 - 37
Renal Failure	6	33	9 - 80	10	30	15 - 77
Severe Acute Heart Disease	31	39	18 - 53	30	20	25 - 56
Severe Chronic Heart Disease	52	21	13 - 36	45	20	11 - 36
Severe Trauma	0	-	-	1	0	0 -100
Gastrointestinal Disease	87	6	1 - 16	89	3	0 - 15
Gynecologic Disease	3	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	97	3	1 - 11	103	6	1 - 14
Musculoskeletal/Skin Conditions	76	1	0 - 12	81	4	0 - 20
Neuropsychiatric/Sensory Disease	21	0	0 - 37	28	0	0 - 42
Urologic Disease	27	0	0 - 37	30	0	0 - 97

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	170
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	113
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	130
Licensed Practical Nurses:	47

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEDICARE PROVIDER # 490045

PRINCE WILLIAM HOSPITAL

Our Pride Is In A Healthy Community.

Kenneth B. Swenson
President

8700 SUDLEY ROAD
P.O. BOX 2610
MANASSAS, VIRGINIA 22110-9879
703 369-8350

October 19, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

We have reviewed the specific mortality data for Prince William Hospital from the Health Care Financing Administration and would like to share the following with you:

1) Prince William Hospital is a not-for-profit community hospital that provides acute care beds for medical/ surgical patients. The hospital has an Oncology Unit as well as a Psychiatric Unit and an Alcohol/Drug Abuse Rehabilitation Unit.

2) We found the statistics you gave us were based on 878 medicare admissions. Our records indicate there were 1,429 medicare admissions. Of these, 221 patients were under the age of 65 and had medicare coverage due to a chronic illness. Fifty-one patients were 90 years of age or over and three were over 100 years of age.

3) Of the 1,429 patients, there were 85 deaths in the hospital giving a mortality of 5.9%.

4) Our records indicate that three of the patients listed as having expired in the hospital actually expired after leaving the hospital, and another three patients listed as having expired after leaving the hospital actually expired in the hospital.

   Of the 17 patients who did expire after leaving the hospital, there was assistance from our hospital Social Service Department in 14 cases. The patients either went to a nursing home, went home with home health services or to an in-patient Hospice.

5) Under "Hospital Characteristics" for 1986, our hospital is listed as having 104 beds. Prince William Hospital has 170 beds.

Prince William Hospital received a 3 year accreditation from the Joint Commission on Accreditation of Hospitals in 1987. The hospital has an active Quality Assurance Committee of the Medical Staff and the Hospital that monitors all patient care. We are aware of the mortality statistics of our hospital and recognize these statistics as just one of many factors that are an indicator of the quality of care given at this hospital.

Sincerely,

Kenneth B. Swenson /g

Kenneth B. Swenson
President and Administrator

PULASKI COMMUNITY HOSP

2400 LEE HIGHWAY
PULASKI, VA 24301

Medicare Hospital Provider Number: 490116

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,083	10	9 - 14	1,000	10	8 - 13
Cancer	17	47	22 - 68	28	64	28 - 65
Cerebrovascular Accidents	35	26	19 - 48	48	35	19 - 47
Gastrointestinal Catastrophes	7	57	5 - 72	10	40	5 - 64
Infectious Disease	14	29	18 - 65	10	10	16 - 61
Metabolic/Electrolyte Disorders	10	0	8 - 46	5	0	1 - 70
Pulmonary Disease	57	28	13 - 38	41	10	12 - 35
Renal Failure	5	40	11 - 85	3	67	4 - 87
Severe Acute Heart Disease	39	31	25 - 55	29	14	27 - 54
Severe Chronic Heart Disease	54	19	15 - 38	59	19	13 - 34
Severe Trauma	0	-	-	2	0	5 - 89
Gastrointestinal Disease	110	1	1 - 7	105	1	1 - 8
Gynecologic Disease	9	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	158	4	2 - 9	173	3	1 - 8
Musculoskeletal/Skin Conditions	99	5	1 - 14	84	4	0 - 22
Neuropsychiatric/Sensory Disease	33	3	0 - 45	38	0	0 - 19
Urologic Disease	61	3	0 - 17	45	4	0 - 28

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 153
Occupancy Rate (%): 54
Ownership/Control: Private, For Profit

STAFFING

Total Number of Physicians: 23
Percent of Physicians Who Are Board Certified Specialists: 70
Interns and Residents: 0
Registered Nurses: 77
Licensed Practical Nurses: 46

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

R J REYNOLDS-PATRICK CO MEM HOSP

ROUTE 1
STUART, VA 24171

Medicare Hospital Provider Number: 490054

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	405	12	10 - 17	424	11	8 - 15
Cancer	7	71	26 - 88	2	50	6 - 95
Cerebrovascular Accidents	16	19	12 - 52	22	23	11 - 47
Gastrointestinal Catastrophes	6	67	8 - 75	3	33	1 - 88
Infectious Disease	13	46	15 - 66	5	20	4 - 74
Metabolic/Electrolyte Disorders	22	23	6 - 46	30	20	7 - 42
Pulmonary Disease	36	19	13 - 41	31	19	10 - 41
Renal Failure	3	33	8 - 90	3	67	6 - 89
Severe Acute Heart Disease	11	45	19 - 72	17	18	17 - 55
Severe Chronic Heart Disease	15	7	8 - 42	18	61	11 - 55
Severe Trauma	4	25	7 - 81	1	0	0 - 99
Gastrointestinal Disease	38	3	0 - 36	41	2	0 - 24
Gynecologic Disease	6	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	47	0	1 - 11	62	0	1 - 9
Musculoskeletal/Skin Conditions	23	0	0 - 38	32	3	0 - 80
Neuropsychiatric/Sensory Disease	8	13	0 -100	13	8	0 -100
Urologic Disease	9	0	0 - 99	7	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	77
Occupancy Rate (%):	30
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	7
Percent of Physicians Who Are Board Certified Specialists:	29
Interns and Residents:	0
Registered Nurses:	35
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

RADFORD COMMUNITY HOSP

8TH RANDOLPH STS
RADFORD, VA 24141

Medicare Hospital Provider Number: 490042

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,179	11	8 - 13	1,180	12	9 - 14
Cancer	27	52	27 - 66	32	47	27 - 63
Cerebrovascular Accidents	38	21	17 - 44	47	28	16 - 42
Gastrointestinal Catastrophes	12	25	12 - 62	13	23	12 - 60
Infectious Disease	8	50	8 - 70	7	0	17 - 63
Metabolic/Electrolyte Disorders	36	19	9 - 41	49	18	7 - 36
Pulmonary Disease	51	24	13 - 38	65	23	11 - 34
Renal Failure	3	0	3 - 81	10	10	14 - 70
Severe Acute Heart Disease	41	63	25 - 55	47	51	25 - 55
Severe Chronic Heart Disease	59	15	13 - 33	54	30	13 - 39
Severe Trauma	2	50	0 - 95	1	0	3 - 98
Gastrointestinal Disease	117	2	1 - 9	109	3	1 - 10
Gynecologic Disease	26	0	0 -100	17	0	0 -100
Low-Risk Heart Disease	147	5	1 - 10	120	5	1 - 11
Musculoskeletal/Skin Conditions	90	4	0 - 16	105	2	0 - 10
Neuropsychiatric/Sensory Disease	38	3	0 - 51	47	0	0 - 15
Urologic Disease	67	0	0 - 17	52	0	0 - 25

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	175
Occupancy Rate (%):	46
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	59
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	112
Licensed Practical Nurses:	52

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Radford
The Community Hospital

October 21, 1988

William L. Roper, M.D.
Health Standards & Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Doctor Roper:

We appreciate the opportunity to review the 1987 mortality data prepared by your office for release to the public in December.

Recognizing that additional adjustments have been made in calculating mortality rates, specifically regarding intensity levels, we still remain concerned about using death rates to measure quality of care.

Although the report lists a total of 1,179 Medicare cases for 1987, a total of 1,959 patients were actually admitted. This discrepancy may be accounted for possibly by the HCFA methodology which counts only the last admission of a single patient, not repeat admissions of the same patient.

With the exception of verifying the 45 deaths which occurred within thirty days of discharge from the hospital, we found no error in the HCFA mortality data. As the patient information contained in the medical record covers only the time period for actual hospitalization, we are unable to provide verification for the 45 deaths occurring post-discharge.

Mortality review is only one component of the quality assurance program at Radford Community Hospital as all hospital deaths are reviewed within the respective medical staff departments monthly. Our program is an ongoing, objective and systematic evaluation process to evaluate the quality and appropriateness of patient care. Through this process, opportunities are identified to improve patient care and take action to resolve problems and follow-up to assure resolution. Chaired by a physician, the quality assurance committee includes six physician members, one nurse, one board member, one quality assurance coordinator, and three administrative staff members. Board members, medical staff, management, and employees share a strong commitment to quality patient care.

Over the years, Radford Community Hospital has established a regional presence, drawing patients from a broad area of southwestern Virginia. The hospital offers comprehensive services and has a diverse medical staff comprised of sixty-three physicians representing twenty-two specialty areas including cardiology.

In particular, our cardiology service is a strong service with a rapid-growing patient volume. We offer a full complement of non-invasive diagnostic cardiology procedures. Though our mortality rate overall for all causes of death and specifically for severe chronic heart disease are within the predicted ranges, we are slightly above the expected range for severe acute heart disease. However, the rate for severe chronic heart disease is considerably less at 13% compared to 30% for the same category last year.

Also our acuity level continues to be rather high for an acute care rural hospital. The most recent case mix index was 1.1161 compared to indices of 1.0663 and .9716 for the two closest hospitals in our area.

With continued support from organizations such as the Joint Commission on Accreditation of Healthcare Organizations which develops quality monitoring activities and applies uniform standards throughout the health-care industry, we will work constantly to fulfill our mission to those we serve. We remain committed to providing quality care at a reasonable cost.

As a final comment, we noted the following errors in the information on hospital characteristics which was included as part of the HCFA report. Our total number of beds is 175, rather than the reported 129 figure. Eighty-one percent of our physicians are board certified, not sixty as reported. RNs per bed, LPNs per bed, and the occupancy rate were not calculated correctly. Under specialty services, we offer eye harvest only as an organ transplant service.

Sincerely,

William P. Merkt

William E. Merkt, executive vice president
and chief operating officer

WM/bh

RAPPAHANNOCK GEN HOSP

SWINGTON ROAD
KILMARNOCK, VA 22482

Medicare Hospital Provider Number: 490123

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	861	12	9 - 14	977	11	9 - 14
Cancer	21	71	28 - 68	39	46	29 - 62
Cerebrovascular Accidents	48	25	12 - 38	27	26	11 - 45
Gastrointestinal Catastrophes	6	50	11 - 79	5	0	10 - 67
Infectious Disease	3	0	5 - 79	11	64	15 - 69
Metabolic/Electrolyte Disorders	28	18	15 - 49	14	36	9 - 59
Pulmonary Disease	39	18	14 - 41	42	17	13 - 38
Renal Failure	3	33	4 - 88	4	25	9 - 85
Severe Acute Heart Disease	32	38	20 - 54	44	32	24 - 52
Severe Chronic Heart Disease	53	25	11 - 36	57	12	14 - 33
Severe Trauma	1	100	0 - 97	1	0	0 - 99
Gastrointestinal Disease	73	1	1 - 11	77	3	1 - 12
Gynecologic Disease	7	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	76	0	2 - 7	83	5	1 - 14
Musculoskeletal/Skin Conditions	111	3	0 - 17	129	2	0 - 9
Neuropsychiatric/Sensory Disease	20	10	0 - 51	32	6	0 - 61
Urologic Disease	30	0	0 - 33	34	3	0 - 52

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	76
Occupancy Rate (%):	57
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	27
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	0
Registered Nurses:	64
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Rappahannock General Hospital P.O. Box 1449 Kilmarnock, Virginia 22482 (804) 435-8000

R. Frederick Baensch, President

September 27, 1988

Health Standares and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207
Attention: Mrs. Sandra Kappert
Medicare Provider# 490123

Gentlemen:

In response to your letter dated September 15, 1988 regarding the December publication of Medicare Hospital Mortality Information, the following statistics should be amended:

Beds	76
Total # of Physicians	31
Percent of Physicians who are Board Certified Specialists	80%
Coronary Care Unit	Yes
Hospice Care	Yes

Should you require additional information, please contact our office at the above address.

Sincerely,

R. Frederick Baensch
Administrator

RFB/slm

RESTON MED CNTR

1850 TOWN CENTER PKWY PO BOX 3
RESTON, VA 22090

Medicare Hospital Provider Number: 490107

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	434	14	8 - 16	268	6	6 - 13
Cancer	12	50	19 - 72	3	33	10 - 90
Cerebrovascular Accidents	19	47	8 - 52	6	33	7 - 73
Gastrointestinal Catastrophes	4	50	5 - 82	1	100	3 - 99
Infectious Disease	2	50	1 - 93	0	-	-
Metabolic/Electrolyte Disorders	12	17	10 - 57	3	33	10 - 90
Pulmonary Disease	20	35	9 - 51	9	0	7 - 46
Renal Failure	1	100	3 - 98	3	67	7 - 89
Severe Acute Heart Disease	22	27	20 - 57	7	29	11 - 72
Severe Chronic Heart Disease	23	22	8 - 44	12	17	9 - 54
Severe Trauma	3	67	2 - 87	1	0	1 - 97
Gastrointestinal Disease	34	3	0 - 33	48	0	1 - 12
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	63	3	1 - 15	19	0	0 - 42
Musculoskeletal/Skin Conditions	50	4	0 - 36	25	0	0 - 99
Neuropsychiatric/Sensory Disease	18	6	0 - 97	12	0	0 -100
Urologic Disease	14	0	0 - 94	24	0	0 - 48

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	127
Occupancy Rate (%):	43
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	101
Percent of Physicians Who Are Board Certified Specialists:	84
Interns and Residents:	0
Registered Nurses:	113
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HCA Reston Hospital Center

Provider # 490170

COMMENTS ON THE HCFA MORTALITY DATA
RESTON HOSPITAL CENTER
RESTON, VIRGINIA

Interpretive Remarks

In response to the HCFA mortality data concerning Medicare patients at the hospital, we make the following comments:

1. The data is listed under the name of .eston Medical Center. As stated last year the name of this institution is Reston Hospital Center.

2. The correct hospital characteristics are as follows:

Beds (#):	127
Occupancy Rate (%):	66.13
Ownership/Control:	Private, For Profit

Staffing:

Total number of physicians	500
Percent of physicians who are Board Certified Specialists:	85%
Interns and Residents per bed:	0
Registered Nurses per bed:	4
Licensed Practical Nurses per bed:	0

Speciality Services:

Shock/Trauma or Burn Unit:	No
Coronary Care Unit:	Yes
Organ Transplant Service:	No
Hospice Care:	No

RETREAT HOSPITAL

2621 GROVE AVE
RICHMOND, VA 23220

Medicare Hospital Provider Number: 490071

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,970	9	8 - 12	2,019	9	7 - 12
Cancer	76	51	28 - 53	85	52	29 - 54
Cerebrovascular Accidents	64	23	15 - 37	63	25	17 - 40
Gastrointestinal Catastrophes	8	50	8 - 71	7	0	14 - 60
Infectious Disease	19	16	19 - 56	15	27	14 - 60
Metabolic/Electrolyte Disorders	29	17	11 - 44	32	25	10 - 45
Pulmonary Disease	67	28	15 - 39	65	25	14 - 37
Renal Failure	6	67	12 - 82	5	80	16 - 87
Severe Acute Heart Disease	37	27	25 - 55	44	34	26 - 54
Severe Chronic Heart Disease	73	27	16 - 37	67	15	12 - 31
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	204	2	1 - 7	198	1	1 - 6
Gynecologic Disease	29	0	0 -100	29	0	0 -100
Low-Risk Heart Disease	221	2	1 - 6	214	3	1 - 7
Musculoskeletal/Skin Conditions	233	2	0 - 6	316	1	1 - 5
Neuropsychiatric/Sensory Disease	66	2	1 - 13	61	2	0 - 22
Urologic Disease	104	0	1 - 6	113	2	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	168
Occupancy Rate (%):	52
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	140
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	16
Registered Nurses:	110
Licensed Practical Nurses:	85

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	Yes

RICHMOND COMMUNITY HOSP

1500 N 28TH ST
RICHMOND, VA 23223

Medicare Hospital Provider Number: 490094

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	495	6	7 - 12	468	12	9 - 15
Cancer	16	31	22 - 67	20	35	20 - 62
Cerebrovascular Accidents	16	6	11 - 43	22	23	11 - 47
Gastrointestinal Catastrophes	2	50	7 - 96	11	27	10 - 63
Infectious Disease	7	57	6 - 72	9	56	15 - 74
Metabolic/Electrolyte Disorders	27	11	7 - 39	27	19	11 - 45
Pulmonary Disease	13	15	8 - 52	18	33	7 - 51
Renal Failure	4	50	6 - 85	2	50	7 - 96
Severe Acute Heart Disease	6	50	11 - 78	9	22	16 - 69
Severe Chronic Heart Disease	16	6	7 - 39	23	22	6 - 42
Severe Trauma	1	0	0 - 99	1	0	0 - 99
Gastrointestinal Disease	33	3	0 - 27	36	3	1 - 21
Gynecologic Disease	3	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	86	1	1 - 9	88	6	0 - 19
Musculoskeletal/Skin Conditions	16	0	0 - 98	30	0	0 - 62
Neuropsychiatric/Sensory Disease	78	0	0 - 22	18	0	0 -100
Urologic Disease	14	0	0 - 50	6	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	102
Occupancy Rate (%):	54
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	57
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	0
Registered Nurses:	30
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

RICHMOND EYE AND EAR HOSP

1001 E MARSHALL ST
RICHMOND, VA 23219

Medicare Hospital Provider Number: 490003

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	227	0	1 - 5	260	0	1 - 5
Cancer	1	0	1 - 97	0	-	-
Cerebrovascular Accidents	1	0	0 -100	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	0	-	-
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	1	0	2 - 98
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	2	0	0 -100	1	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	1	0	0 -100	1	0	0 -100
Musculoskeletal/Skin Conditions	0	-	-	4	0	0 -100
Neuropsychiatric/Sensory Disease	177	0	0 - 5	218	0	0 - 5
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	60
Occupancy Rate (%):	10
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	66
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	0
Registered Nurses:	28
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Richmond Eye and Ear Hospital
1001 East Marshall Street • Richmond, Virginia 23219 • (804) 775-4500

October 19, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Buidling, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Ms. Kappert:

Please be advised that the percent of physicians who are Board certified specialists at REEH is 88%. The HCFA Medicare Hospital Mortality Report had listed this rate as 0%.

I would appreciate the updating of our records in this matter.

Sincerely,

Robert G. Notarianni
Administrator

RGN/s

RICHMOND MEMORIAL HOSP

1300 WESTWOOD AVE
RICHMOND, VA 23227

Medicare Hospital Provider Number: 490069

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,727	13	11 - 15	2,898	13	10 - 14
Cancer	84	33	30 - 54	100	46	28 - 52
Cerebrovascular Accidents	150	25	18 - 34	138	33	18 - 36
Gastrointestinal Catastrophes	29	38	18 - 56	30	40	14 - 53
Infectious Disease	54	43	22 - 52	58	22	23 - 50
Metabolic/Electrolyte Disorders	78	29	15 - 41	72	24	13 - 39
Pulmonary Disease	145	22	18 - 35	163	26	16 - 33
Renal Failure	9	56	16 - 80	20	40	15 - 70
Severe Acute Heart Disease	89	38	29 - 51	96	35	28 - 49
Severe Chronic Heart Disease	148	23	14 - 29	129	20	16 - 31
Severe Trauma	5	40	3 - 78	6	33	8 - 76
Gastrointestinal Disease	208	5	1 - 9	230	3	1 - 7
Gynecologic Disease	15	0	0 -100	28	0	0 -100
Low-Risk Heart Disease	321	3	2 - 6	354	4	1 - 6
Musculoskeletal/Skin Conditions	194	3	1 - 7	226	4	1 - 7
Neuropsychiatric/Sensory Disease	53	0	1 - 11	60	5	0 - 28
Urologic Disease	85	6	0 - 24	95	1	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 321
Occupancy Rate (%): 69
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: (not available)
Percent of Physicians Who Are Board Certified Specialists: (not available)
Interns and Residents: (not available)
Registered Nurses: (not available)
Licensed Practical Nurses: (not available)

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

RICHMOND
MEMORIAL HOSPITAL
We Care for Life.

Richmond Memorial Hospital (Richmond, Virginia) is pleased to have this opportunity to respond to the HCFA Mortality Information for 1987.

First, we would like to correct the hospital characteristics which accompany the Mortality Information. Richmond Memorial Hospital is a community owned non-profit hospital. The correct number of staffed beds is 351 with an average occupancy of 72%. In terms of specialty services, Richmond Memorial Hospital does have a coronary care unit and hospice care, but does not have on site organ transplant services.

These mortality rates are calculated for Medicare patients only - a patient population by definition, generally 65 years of age or older. In calculating these mortality rates, HCFA has included patients who died within 30 days of admission to the hospital. This means the mortality rate can include patients who died in a nursing home, hospice or at home. When these patients are not included in the calculations, the mortality rate at the hospital is lower.

Richmond Memorial Hospital supports the continuing efforts to define the patient's severity of illness so that future mortality statistics will more closely approximate the true quality of care received by the patient.

In these statistics, a number of medical conditions, i.e. diagnoses, were grouped together to form a category for which one mortality rate is reported. This combination of several diagnoses makes it difficult for the public to analyze the data without further information.

For further clarification, Richmond Memorial Hospital has provided some additional information on several categories.

Overall, Richmond Memorial Hospital had 2,727 Medicare cases with a mortality rate calculated at 13%. The range of mortality rates predicted by HCFA for this hospital is 11-15%. In a substantial number of cases, the death was expected by the patient's family and the physician.

In one category, severe chronic heart disease, there were 34 deaths among 148 patients treated. Of these 34 deaths, the median age was 80 and the average number of diagnoses (such as respiratory disease, cancer) was 4.

In another category, infectious disease, there were 23 deaths among 54 patients treated. Of these 23 deaths, the median age was 88, and the median diagnoses was 4. Finally, in the renal disease category, there were 5 deaths among 9 patients treated. Of these 5 deaths, the median age was 89, and the median diagnoses was 5.

Please direct any questions regarding these figures or the Mortality Information for 1987 to the Public Relations Office at Richmond Memorial Hospital.

RIVERSIDE HOSPITAL

500 J CLYDE MORRIS BLVD
NEWPORT NEWS, VA 23601

Medicare Hospital Provider Number: 490052

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,901	12	9 - 13	3,571	13	9 - 13
Cancer	256	43	33 - 51	228	44	31 - 50
Cerebrovascular Accidents	150	21	18 - 33	131	34	17 - 36
Gastrointestinal Catastrophes	35	23	17 - 50	44	20	16 - 46
Infectious Disease	41	22	19 - 49	30	33	15 - 52
Metabolic/Electrolyte Disorders	34	29	6 - 42	44	41	9 - 43
Pulmonary Disease	145	26	15 - 33	135	24	15 - 33
Renal Failure	23	22	10 - 61	14	36	6 - 67
Severe Acute Heart Disease	156	35	26 - 44	150	45	27 - 45
Severe Chronic Heart Disease	156	21	15 - 29	176	23	14 - 29
Severe Trauma	5	20	3 - 75	5	0	6 - 65
Gastrointestinal Disease	289	2	1 - 6	248	3	1 - 7
Gynecologic Disease	38	0	0 -100	36	0	0 - 95
Low-Risk Heart Disease	496	4	2 - 6	439	5	1 - 6
Musculoskeletal/Skin Conditions	440	2	1 - 5	361	2	0 - 5
Neuropsychiatric/Sensory Disease	150	5	0 - 16	121	2	0 - 12
Urologic Disease	110	1	0 - 13	106	2	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	576
Occupancy Rate (%):	70
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	249
Percent of Physicians Who Are Board Certified Specialists:	89
Interns and Residents:	57
Registered Nurses:	366
Licensed Practical Nurses:	133

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	Yes

ROANOKE MEMORIAL HOSP

BELLEVIEW JEFFERSON STS
ROANOKE, VA 24033

Medicare Hospital Provider Number: 490024

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,024	11	10 - 14	4,139	13	10 - 14
Cancer	195	38	31 - 50	248	43	32 - 51
Cerebrovascular Accidents	154	22	18 - 34	148	26	18 - 34
Gastrointestinal Catastrophes	31	19	20 - 53	37	22	18 - 50
Infectious Disease	43	33	21 - 52	49	35	20 - 50
Metabolic/Electrolyte Disorders	75	31	14 - 42	51	31	13 - 43
Pulmonary Disease	141	23	18 - 35	186	25	16 - 32
Renal Failure	23	35	19 - 71	22	45	13 - 68
Severe Acute Heart Disease	151	29	26 - 44	139	40	27 - 45
Severe Chronic Heart Disease	172	23	14 - 29	182	20	16 - 30
Severe Trauma	19	32	8 - 54	20	35	8 - 54
Gastrointestinal Disease	258	4	1 - 7	247	6	1 - 9
Gynecologic Disease	46	0	0 -100	42	0	0 - 91
Low-Risk Heart Disease	599	5	2 - 6	579	3	2 - 6
Musculoskeletal/Skin Conditions	389	3	1 - 5	366	3	1 - 6
Neuropsychiatric/Sensory Disease	115	3	0 - 12	133	5	0 - 12
Urologic Disease	176	1	0 - 7	137	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	677
Occupancy Rate (%):	68
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	240
Percent of Physicians Who Are Board Certified Specialists:	83
Interns and Residents:	82
Registered Nurses:	454
Licensed Practical Nurses:	212

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Roanoke
Memorial
Hospitals

HOUSTON L. BELL, JR
Chief Operating Officer

An Affiliate of **CARILION** *Health System*

October 19, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Ms. Kappert:

Roanoke Memorial Hospitals has received the mortality information provided by Health Care Financing Administration regarding Medicare patients discharged from this Hospital in 1987. We appreciate the opportunity to respond.

As was the case with similar information released last year, there are no severity of illness calculations that allow differentiation based on the acuity of the individual patient. Despite some consideration for co-morbidity, the information does not explain how facilities that treat more acutely ill patients may have higher mortality rates than facilities that treat less intensively ill patients.

Additionally, there is no explanation that deaths did not necessarily occur in the hospital. Since patients in the study expired within 30 days of their last admission, a death may have occurred after the patient left the hospital and/or may not have been related to the hospital admission at all.

Again, thank you for the opportunity to respond.

Sincerely,

Houston L. Bell, Jr.
Chief Operating Officer

cr

ROCKINGHAM MEM HOSP

235 CANTRELL AVE
HARRISONBURG, VA 22801

Medicare Hospital Provider Number: 490004

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,465	13	10 - 14	2,468	12	10 - 14
Cancer	79	48	31 - 57	82	49	30 - 55
Cerebrovascular Accidents	94	26	18 - 37	91	26	18 - 37
Gastrointestinal Catastrophes	32	13	18 - 48	21	33	15 - 57
Infectious Disease	27	30	17 - 53	25	24	16 - 52
Metabolic/Electrolyte Disorders	37	16	11 - 41	36	22	7 - 40
Pulmonary Disease	163	25	18 - 34	160	19	17 - 33
Renal Failure	19	37	18 - 72	18	39	14 - 70
Severe Acute Heart Disease	87	43	26 - 49	106	40	28 - 49
Severe Chronic Heart Disease	127	19	16 - 32	125	20	17 - 33
Severe Trauma	2	0	0 - 94	4	25	2 - 81
Gastrointestinal Disease	234	3	1 - 7	243	5	1 - 8
Gynecologic Disease	30	0	0 -100	41	0	0 - 99
Low-Risk Heart Disease	240	5	1 - 8	242	4	1 - 7
Musculoskeletal/Skin Conditions	227	4	0 - 8	237	2	0 - 6
Neuropsychiatric/Sensory Disease	66	3	0 - 21	60	0	0 - 11
Urologic Disease	128	2	0 - 11	121	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	240
Occupancy Rate (%):	75
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	107
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	208
Licensed Practical Nurses:	89

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

RUSSELL CNTY MED CNTR

CARROL TATE STS
LEBANON, VA 24266

Medicare Hospital Provider Number: 490002

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	615	9	9 - 14	613	13	9 - 16
Cancer	6	67	25 - 91	10	50	18 - 74
Cerebrovascular Accidents	16	31	13 - 57	17	47	14 - 59
Gastrointestinal Catastrophes	5	20	4 - 74	3	33	2 - 87
Infectious Disease	2	0	3 - 88	4	25	4 - 80
Metabolic/Electrolyte Disorders	7	29	7 - 70	7	29	3 - 70
Pulmonary Disease	48	15	14 - 37	56	30	18 - 44
Renal Failure	1	0	3 - 99	4	25	12 - 89
Severe Acute Heart Disease	28	32	20 - 55	40	42	23 - 54
Severe Chronic Heart Disease	23	22	10 - 45	20	40	8 - 50
Severe Trauma	3	33	2 - 87	0	-	-
Gastrointestinal Disease	56	2	0 - 19	61	0	2 - 9
Gynecologic Disease	4	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	111	3	1 - 9	114	3	1 - 10
Musculoskeletal/Skin Conditions	25	4	0 - 95	32	3	0 - 40
Neuropsychiatric/Sensory Disease	17	12	0 -100	12	0	0 -100
Urologic Disease	23	0	0 - 53	19	0	0 - 64

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	78
Ownership/Control:	Private, For Profit

STAFFING

Interns and Residents:	0
Registered Nurses:	48
Licensed Practical Nurses:	31

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SENTARA HAMPTON GENERAL HOSP

3120 VICTORIA BLVD
HAMPTON, VA 23669

Medicare Hospital Provider Number: 490093

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,993	13	10 - 15	2,041	13	10 - 15
Cancer	96	31	28 - 51	91	45	28 - 52
Cerebrovascular Accidents	107	26	17 - 36	117	26	18 - 36
Gastrointestinal Catastrophes	26	27	14 - 52	18	50	12 - 59
Infectious Disease	20	50	16 - 60	27	41	19 - 57
Metabolic/Electrolyte Disorders	50	28	14 - 45	72	17	13 - 38
Pulmonary Disease	92	26	14 - 35	105	29	16 - 36
Renal Failure	7	71	12 - 79	15	47	12 - 71
Severe Acute Heart Disease	73	36	26 - 50	78	31	25 - 47
Severe Chronic Heart Disease	115	23	14 - 31	96	21	13 - 31
Severe Trauma	2	0	1 - 90	2	50	0 - 97
Gastrointestinal Disease	139	5	1 - 11	137	4	1 - 10
Gynecologic Disease	17	0	0 -100	19	5	0 -100
Low-Risk Heart Disease	181	3	1 - 8	219	3	1 - 7
Musculoskeletal/Skin Conditions	157	4	0 - 13	191	3	1 - 8
Neuropsychiatric/Sensory Disease	42	2	0 - 24	43	14	0 - 88
Urologic Disease	96	1	0 - 10	63	0	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	277
Occupancy Rate (%):	68
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	161
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	201
Licensed Practical Nurses:	105

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SENTARA LEIGH HOSPITAL

830 KEMPSVILLE RD
NORFOLK, VA 23507

Medicare Hospital Provider Number: 490046

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,320	10	8 - 12	2,175	11	8 - 13
Cancer	82	33	26 - 51	97	25	26 - 48
Cerebrovascular Accidents	68	28	15 - 37	80	29	17 - 38
Gastrointestinal Catastrophes	18	17	18 - 58	24	29	16 - 56
Infectious Disease	9	22	13 - 68	14	29	12 - 60
Metabolic/Electrolyte Disorders	32	31	12 - 48	32	25	9 - 44
Pulmonary Disease	110	21	13 - 31	106	25	13 - 33
Renal Failure	17	24	13 - 66	3	33	4 - 88
Severe Acute Heart Disease	63	37	28 - 53	65	32	27 - 51
Severe Chronic Heart Disease	102	19	15 - 32	86	23	14 - 33
Severe Trauma	2	50	6 - 94	2	50	1 - 94
Gastrointestinal Disease	225	3	1 - 7	163	4	1 - 9
Gynecologic Disease	24	4	0 -100	21	0	0 -100
Low-Risk Heart Disease	237	2	1 - 6	211	5	1 - 8
Musculoskeletal/Skin Conditions	363	2	1 - 5	310	3	0 - 7
Neuropsychiatric/Sensory Disease	74	3	0 - 17	80	5	0 - 31
Urologic Disease	64	0	0 - 23	76	1	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	250
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	657
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	261
Licensed Practical Nurses:	60

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

SENTARA
Leigh Hospital

830 Kempsville Road
Norfolk, Virginia 23502
804-466-6000

October 20, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building 2-D-2
6325 Security Blvd.
Baltimore, Maryland 21207

Attn: Sandra Kappert

Dear Ms. Kappert:

The HCFA Mortality Report for Sentara Leigh Hospital has been reviewed by our facility. Attached are our comments which we request to be included as part of the general public release on December 17, 1988.

Sincerely,

Joanne Mosser
Vice President

lkw

Attachment

COMMENTS ON THE HCFA MORTALITY DATA
SENTARA LEIGH HOSPITAL
NORFOLK, VIRGINIA

DATA VERIFICATION:

The data used by HCFA indicates a total of 2320 Medicare patients whose last discharge during 1987 was from Sentara Leigh Hospital. Of these, 220 patients died within 30 days of admission. Of these deaths, 178 died while still a patient of the hospital, while 42 died after discharge.

Sentara Leigh Hospital records indicate that 3,721 total Medicare discharges occurred during 1987. Presumbably the discrepancy in totals reflects multiple admissions of individual beneficiaries to this or different hospitals.

Sentara Leigh Hospital is unable to verify the death of those 42 patients listed as dying after discharge as such information is not included in the patient's medical record. It is undetermined whether these deaths in any way relate to the conditions for which the patient was treated at Sentara Leigh Hospital.

The AHA information should be modified to reflect that Sentara Leigh Hospital is a private, not for profit hospital, which has 250 licensed beds and had a bed occupancy rate for 1987 of 74%. There are 947 physicians on the Medical Staff, 72% of whom are Board Certified Specialists. Sentara Leigh Hospital has .93 full time equivalent registered nurses per licensed bed and .19 full time equivalent licensed practical nurses per licensed bed.

INTERPRETIVE REMARKS:

Sentara Leigh Hospital mortality rates compared favorably in 1986 and 1987 with the data supplied by HCFA. However, the hospital continues to note inaccuracies in this information and questions the validity of HCFA's methodology, and the pertinence of this reported data especially in classifying and attributing responsibility for those deaths occurring outside of the hospital.

Sentara Leigh Hospital offers medical, surgical, and emergency services to acutely ill patients in the Hampton Roads area, and receives referrals from a wide geographic area including the Eastern Shore of Virginia, other Virginia localities, and Northeastern North Carolina. The severity of illness of those patients treated at this facility are recognized by HCFA in our assigned acuity index of 1.2326 . The average Medicare patient has an acuity level of 1.0.

As part of the Medical Staff Quality Assurance Program for Sentara Leigh Hospital, all hospital deaths are reviewed within the respective medical staff departments on a monthly basis.

SENTARA NORFOLK GENERAL

600 GRESHAM DR
NORFOLK, VA 23507

Medicare Hospital Provider Number: 490007

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	4,288	11	9 - 13	4,272	12	9 - 13
Cancer	188	47	33 - 53	251	43	34 - 53
Cerebrovascular Accidents	158	28	19 - 35	157	30	19 - 35
Gastrointestinal Catastrophes	26	42	13 - 54	26	31	14 - 53
Infectious Disease	27	37	18 - 56	32	41	19 - 56
Metabolic/Electrolyte Disorders	64	27	14 - 41	66	23	10 - 37
Pulmonary Disease	104	24	15 - 34	104	23	13 - 33
Renal Failure	30	17	5 - 55	35	11	6 - 55
Severe Acute Heart Disease	171	28	26 - 43	123	32	27 - 46
Severe Chronic Heart Disease	131	24	14 - 30	160	20	16 - 31
Severe Trauma	19	37	7 - 54	18	44	8 - 57
Gastrointestinal Disease	189	5	1 - 9	189	4	1 - 8
Gynecologic Disease	15	0	0 -100	27	4	0 -100
Low-Risk Heart Disease	791	4	2 - 6	760	5	2 - 6
Musculoskeletal/Skin Conditions	338	4	1 - 6	339	3	1 - 6
Neuropsychiatric/Sensory Disease	301	3	0 - 7	295	2	0 - 6
Urologic Disease	195	2	0 - 9	192	0	0 - 5

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	644
Occupancy Rate (%):	75
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	657
Percent of Physicians Who Are Board Certified Specialists:	75
Interns and Residents:	0
Registered Nurses:	749
Licensed Practical Nurses:	179

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	Yes

SENTARA
NORFOLK
GENERAL
HOSPITAL
1888·1988

600 Gresham Drive
Norfolk, Virginia 23507
804-628-3000

October 18, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Hospital Mortality Information
P.O. Box 26684
Baltimore, Maryland 21207

RE: HOSPITAL 490007

Enclosed for your review is the response of Sentara Norfolk General Hospital to the preliminary release of hospital specific HCFA mortality data. If you have any questions regarding this information, please do not hesitate to contact me at (804) 628-3364.

Sincerely,

Daniel C. Riina

Daniel C. Riina
Vice President-SH

DCR/ch

COMMENTS ON THE HCFA MORTALITY DATA
SENTARA NORFOLK GENERAL HOSPITAL
NORFOLK, VIRGINIA

DATA VERIFICATION:

The data used by HCFA indicates a total of 4,288 Medicare patients admitted to Sentara Norfolk General Hospital in 1987. Of these, 492 patients died within 30 days of admission. Of these deaths, 435 died while still a patient of the hospital, while 57 died after discharge.

Sentara Norfolk General Hospital records indicate that 6,678 Medicare admissions occurred during 1987. Presumably the discrepancy in totals reflects multiple admissions of individual beneficiaries to this or different hospitals.

Sentara Norfolk General Hospital is unable to verify the death of those 57 patients listed as dying after discharge as such information is not included in the patient's medical record.

The AHA information should be modified to reflect that Sentara Norfolk General Hospital is a private, not for profit hospital, which has 644 beds and has a licensed bed occupancy rate of 74%. There are 947 physicians on the Medical Staff, 72% of whom are Board Certified Specialists. Sentara Norfolk General Hospital has 0.17 full time equivalent interns and residents per bed.

Sentara Norfolk General Hospital has 0.96 full time equivalent registered nurses per licensed bed and 0.22 full time equivalent licensed practical nurses per licensed bed. Sentara Norfolk General Hospital offers shock/trauma or burn unit services, coronary care unit services, organ transplant services and hospice care.

INTERPRETIVE REMARKS:

Sentara Norfolk General Hospital mortality rates compared favorably in 1986 and 1987 with the data supplied by HCFA, and maintains the posture that the Medicare Mortality Release does not, in and of itself, indicate the quality of care provided at the hospital.

Sentara Norfolk General Hospital provides a complex range of health care services to the most acutely ill patients in the Hampton Roads area and receives referrals from a wide geographic area including the Eastern Shore of Virginia, Virginia localities south of Richmond, Dare County, N.C. and Northeastern North Carolina. SNGH has one of the five state-designated Level 1 Trauma Services within the State of Virginia and is supported by a hospital based air ambulance. Other services offered in the area only by Sentara Norfolk General Hospital include the Burn Unit, Open Heart Surgery, Acute Cardiac Intervention, a Neuro Intensive Care Unit, Invitro Fertilization, Hospice, and High Risk Obstetrics. SNGH also has the largest and most sophisticated cardiac program and radiation oncology program in the area.

These programs and the severity of illness of patients treated at this tertiary care center are recognized by HCFA in our assigned acuity index of 1.5230. The average Medicare patient has an acuity level of 1.0.

As part of the Medical Staff Quality Assurance Program for Sentara Norfolk General Hospital, all hospital deaths are reviewed within the respective medical staff departments on a monthly basis.

SHENANDOAH CO MEML HOSP

P O BOX 508
WOODSTOCK, VA 22664

Medicare Hospital Provider Number: 490006

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	616	11	10 - 16	694	15	9 - 16
Cancer	11	27	21 - 72	18	72	25 - 67
Cerebrovascular Accidents	34	15	16 - 42	44	32	14 - 42
Gastrointestinal Catastrophes	10	40	9 - 66	2	50	1 - 93
Infectious Disease	10	20	13 - 64	10	40	12 - 68
Metabolic/Electrolyte Disorders	11	9	10 - 54	2	50	4 - 93
Pulmonary Disease	51	24	17 - 42	50	12	13 - 35
Renal Failure	2	50	2 - 93	3	0	9 - 84
Severe Acute Heart Disease	29	28	22 - 56	28	61	22 - 58
Severe Chronic Heart Disease	41	12	13 - 35	56	34	11 - 37
Severe Trauma	0	-	-	2	0	1 - 90
Gastrointestinal Disease	64	0	1 - 9	47	2	1 - 17
Gynecologic Disease	11	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	49	4	0 - 26	59	5	0 - 20
Musculoskeletal/Skin Conditions	60	3	0 - 34	71	1	0 - 16
Neuropsychiatric/Sensory Disease	9	11	0 -100	12	0	0 -100
Urologic Disease	23	4	0 - 94	24	4	0 - 67

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	133
Occupancy Rate (%):	48
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	20
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	0
Registered Nurses:	61
Licensed Practical Nurses:	34

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SMYTH COUNTY COMM HOSP

PARK BLVD
MARION, VA 24354

Medicare Hospital Provider Number: 490038

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,048	12	10 - 15	1,085	15	10 - 15
Cancer	33	48	27 - 62	24	71	28 - 65
Cerebrovascular Accidents	32	38	13 - 47	40	30	15 - 44
Gastrointestinal Catastrophes	6	0	14 - 65	12	50	13 - 67
Infectious Disease	1	0	0 - 99	4	50	5 - 82
Metabolic/Electrolyte Disorders	44	11	11 - 38	59	19	10 - 37
Pulmonary Disease	121	20	13 - 31	96	23	14 - 34
Renal Failure	3	0	8 - 83	1	100	2 - 97
Severe Acute Heart Disease	58	34	24 - 50	55	49	24 - 52
Severe Chronic Heart Disease	47	34	12 - 39	50	18	13 - 36
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	101	1	1 - 8	99	2	0 - 10
Gynecologic Disease	10	0	0 -100	13	0	0 -100
Low-Risk Heart Disease	116	3	1 - 10	120	7	1 - 13
Musculoskeletal/Skin Conditions	54	2	0 - 17	71	4	1 - 16
Neuropsychiatric/Sensory Disease	19	5	0 - 97	43	2	0 - 28
Urologic Disease	57	2	0 - 21	37	3	0 - 45

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	176
Occupancy Rate (%):	42
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	34
Percent of Physicians Who Are Board Certified Specialists:	74
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SOUTHAMPTON MEM HOSP

100 FAIRVIEW DR
FRANKLIN, VA 23851

Medicare Hospital Provider Number: 490092

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	641	13	11 - 17	688	11	9 - 15
Cancer	22	59	26 - 67	10	70	27 - 81
Cerebrovascular Accidents	34	35	16 - 48	29	38	13 - 48
Gastrointestinal Catastrophes	5	60	12 - 83	3	33	1 - 88
Infectious Disease	8	50	15 - 76	16	25	17 - 61
Metabolic/Electrolyte Disorders	15	27	7 - 55	15	7	4 - 43
Pulmonary Disease	41	32	10 - 40	58	26	15 - 40
Renal Failure	3	0	11 - 86	3	33	9 - 91
Severe Acute Heart Disease	32	28	25 - 57	32	38	22 - 56
Severe Chronic Heart Disease	42	12	16 - 38	36	14	14 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	51	4	0 - 22	44	0	1 - 13
Gynecologic Disease	1	0	0 -100	9	0	0 -100
Low-Risk Heart Disease	90	0	2 - 7	111	3	1 - 9
Musculoskeletal/Skin Conditions	37	0	1 - 14	38	3	0 - 29
Neuropsychiatric/Sensory Disease	28	7	0 - 63	32	3	0 - 53
Urologic Disease	27	0	0 - 26	23	0	0 - 68

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 221
Occupancy Rate (%): 78
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 33
Percent of Physicians Who Are Board Certified Specialists: 58
Interns and Residents: 0
Registered Nurses: 61
Licensed Practical Nurses: 49

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

Southampton
Memorial Hospital

100 FAIRVIEW DRIVE, P. O. BOX 817, FRANKLIN, VA 23851 (804) 562-5161

October 24, 1988

Health Standards & Quality Bureau
HCFA
ATTN: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

Please be advised that the Medicare Hospital Mortality Information relevant to Southampton Memorial Hospital, 100 Fairview Drive, Franklin, Virginia 23851 not having a coronary care unit is incorrect.

According to the AHA Annual Survey data from which hospital characteristics were obtained, all hospitals who do not operate a separate, distinct coronary care unit will appear as not having that specific specialty service because the survey instructions request that hospitals operating a general mixed ICU/CCU report under that classification as opposed to reporting under the coronary care unit classification. I would very much appreciate your correcting this information.

While this letter is not intended for publication with the HCFA mortality data release proposed for December, 1988, I would like to comment that Southampton Memorial Hospital's governing body, administration, medical staff, and hospital staff appreciates and shares HCFA's interest and concern for providing quality patient care to all citizens. We do, however, continue to have concerns relevant to the accuracy and validity of the mortality report.

Southampton Memorial Hospital has elected to release a relevant response to the public following the HCFA mortality data release in December.

Thank you for an opportunity to comment on the Medicare hospital mortality information.

Very truly yours,

Edward J. Patnesky, FACHE
President & CEO

SOUTHSIDE COMM HOSP

800 OAK ST
FARMVILLE, VA 23901

Medicare Hospital Provider Number: 490090

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	961	13	9 - 15	979	15	9 - 15
Cancer	22	36	23 - 64	9	78	16 - 70
Cerebrovascular Accidents	28	32	14 - 49	36	33	13 - 44
Gastrointestinal Catastrophes	12	33	15 - 67	6	50	6 - 75
Infectious Disease	2	50	0 - 95	15	33	16 - 64
Metabolic/Electrolyte Disorders	24	25	10 - 49	35	26	10 - 44
Pulmonary Disease	69	26	15 - 38	95	29	16 - 37
Renal Failure	6	67	12 - 82	6	33	13 - 84
Severe Acute Heart Disease	36	33	26 - 57	38	39	24 - 55
Severe Chronic Heart Disease	60	17	13 - 33	61	28	13 - 37
Severe Trauma	0	-	-	1	0	1 - 97
Gastrointestinal Disease	86	2	1 - 11	69	1	1 - 11
Gynecologic Disease	13	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	83	6	1 - 17	97	6	1 - 15
Musculoskeletal/Skin Conditions	61	0	0 - 10	60	2	0 - 24
Neuropsychiatric/Sensory Disease	18	11	0 - 97	16	6	0 -100
Urologic Disease	104	1	0 - 13	76	3	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 117
Occupancy Rate (%): 48
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 29
Percent of Physicians Who Are Board Certified Specialists: 72
Interns and Residents: 0
Registered Nurses: 63
Licensed Practical Nurses: 56

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

SOUTHSIDE REGIONAL MEDICAL CENTER

801 S ADAMS STREET
PETERSBURG, VA 23803

Medicare Hospital Provider Number: 490067

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,392	13	10 - 14	2,443	13	9 - 14
Cancer	72	63	32 - 58	50	44	25 - 55
Cerebrovascular Accidents	101	24	17 - 36	103	33	18 - 38
Gastrointestinal Catastrophes	15	33	14 - 62	15	27	14 - 60
Infectious Disease	33	15	17 - 47	32	38	21 - 57
Metabolic/Electrolyte Disorders	110	25	14 - 38	93	30	13 - 39
Pulmonary Disease	131	31	16 - 35	141	28	17 - 35
Renal Failure	12	50	12 - 73	16	31	16 - 73
Severe Acute Heart Disease	78	37	26 - 49	83	39	24 - 47
Severe Chronic Heart Disease	148	22	16 - 31	160	25	15 - 30
Severe Trauma	8	38	4 - 69	1	0	0 - 98
Gastrointestinal Disease	164	4	2 - 9	167	4	1 - 9
Gynecologic Disease	28	0	0 -100	19	0	0 -100
Low-Risk Heart Disease	249	2	2 - 6	261	4	1 - 7
Musculoskeletal/Skin Conditions	187	3	0 - 8	193	2	0 - 6
Neuropsychiatric/Sensory Disease	118	1	0 - 8	129	2	0 - 9
Urologic Disease	115	1	0 - 20	122	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 325
Occupancy Rate (%): (not available)
Ownership/Control: District/Authority

STAFFING

Total Number of Physicians: (not available)
Percent of Physicians Who Are Board Certified Specialists: (not available)
Interns and Residents: (not available)
Registered Nurses: (not available)
Licensed Practical Nurses: (not available)

SPECIALTY SERVICES

Shock/Trauma Unit: (not available)
Burn Unit: (not available)
Medical/Surgical Intensive Care: (not available)
Cardiac Intensive Care: (not available)
Organ Transplant Service: (not available)
Hospice Care: (not available)

Southside Regional
MEDICAL
CENTER

801 South Adams Street
Petersburg, Virginia 23803
804/862-5000

October 20, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Dr. Roper:

This is to acknowledge receipt of the Health Care Financing Administration (HCFA) mortality information for Southside Regional Medical Center. We thank you for the opportunity to comment.

Quality care provided to our patients is the primary mission of this facility and the only reason we are here. The hospital conducts ongoing quality assurance review and any hospital deaths are reviewed by physicians for any possible quality concerns. We are always interested in any information which is useful in helping us to monitor patient care.

These mortality data, particularly in the format presented, are not of significant benefit. As you stated in your 9/15/88 letter to hospital administrators, "...we cannot and do not recommend the use of the information by itself to make judgments about the quality of care in an individual hospital or to make comparisons among hospitals. Individual hospitals may have very good reasons for their rates being higher than the ranges predicted by HCFA's model."

A detailed review of the HCFA data confirmed that the hospital's actual mortality rates fall within predicted ranges for mortality except cancer. All cases were reviewed, and several important points should be mentioned:

1. The majority of cancer deaths were patients admitted with terminal cancer, often in multiple sites with other complicating conditions, and they were in the last stages of the disease.

2. Several patients listed as having died from cancer in the HCFA data actually died from other natural causes.

3. Some patients listed on the report presumably died outside the hospital. These deaths cannot be confirmed or denied by the hospital since we do not have the same information as HCFA. We know they did not expire in the hospital. These patients did meet HCFA quality of care discharge guidelines when they left the hospital.

4 The Medical Society of Virginia which conducts quality of care review for HCFA did not determine that any of these cases had quality problems.

The hospital will continue to monitor the quality of care provided and would consider any information which HCFA provides.

Sincerely,

Peter C. Olden
Associate Director

PCO/esw

SOUTHWESTERN STATE HOSP

BOX 670
MARION, VA 24354

Medicare Hospital Provider Number: 490105

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	55	2	4 - 15	71	4	4 - 15
Cancer	0	-	-	1	0	3 - 99
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	4	25	2 - 81	3	0	0 - 88
Pulmonary Disease	9	0	5 - 45	12	25	8 - 57
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	1	0	1 - 97	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	1	0	0 -100	0	-	-
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	1	0	0 -100
Musculoskeletal/Skin Conditions	1	0	0 -100	0	-	-
Neuropsychiatric/Sensory Disease	28	0	0 - 77	41	0	0 - 36
Urologic Disease	1	0	0 -100	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	297
Occupancy Rate (%):	94
Ownership/Control:	State Government

STAFFING

Total Number of Physicians:	10
Percent of Physicians Who Are Board Certified Specialists:	60
Interns and Residents:	0
Registered Nurses:	47
Licensed Practical Nurses:	31

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST MARY S HOSPITAL OF RICHMOND

5801 BREMO RD
RICHMOND, VA 23226

Medicare Hospital Provider Number: 490059

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,892	10	9 - 13	2,631	11	9 - 14
Cancer	141	45	29 - 51	124	41	29 - 51
Cerebrovascular Accidents	117	21	19 - 35	83	23	17 - 37
Gastrointestinal Catastrophes	20	30	18 - 60	11	55	13 - 69
Infectious Disease	39	33	23 - 55	46	48	20 - 52
Metabolic/Electrolyte Disorders	42	26	13 - 44	49	10	11 - 37
Pulmonary Disease	117	23	17 - 35	113	21	16 - 35
Renal Failure	6	17	11 - 77	14	43	23 - 82
Severe Acute Heart Disease	57	37	26 - 52	101	37	28 - 49
Severe Chronic Heart Disease	93	15	14 - 31	105	21	14 - 31
Severe Trauma	9	22	6 - 63	4	50	4 - 82
Gastrointestinal Disease	199	3	1 - 7	226	2	1 - 6
Gynecologic Disease	27	0	0 -100	26	0	0 -100
Low-Risk Heart Disease	337	2	1 - 5	279	4	1 - 7
Musculoskeletal/Skin Conditions	341	1	1 - 5	289	2	1 - 5
Neuropsychiatric/Sensory Disease	124	2	1 - 8	76	3	0 - 18
Urologic Disease	136	1	1 - 7	123	1	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	369
Occupancy Rate (%):	66
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	362
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	275
Licensed Practical Nurses:	83

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Medicare Provider Number - 490059

ST. MARY'S HOSPITAL
A Bon Secours Health Care Facility

COMMENTS ON THE HCFA MORTALITY DATA

St. Mary's Hospital, Richmond, VA
October 20, 1988

The data presented is related only to the average number of patients who can be expected to die within 30 days of admission to a certain hospital given the size of the institution and the population it treats and how each individual hospital's actual mortality experience for the year correlates with the prediction. There is no other analysis of the patient population to determine if other risk factors relative to age and/or disease would indicate a higher or lower than average mortality rate. While the data gives some indication of how hospitals rank relative to mortality for the 16 diagnostic categories, it does not give an indication of the quality of care delivered to patients in these categories nor the entire patient population.

Some of the data, relative to hospital characteristics, contained in the "Medicare Hospital Mortality Information" (Survey and Year: AHA 1986) is incorrect. Please correct as follows:

Hospital Characteristics:
    Beds (#): 369
Staffing:
    Total Number of Physicians: 900
    (475 active staff)

In the area of specialty services, while St. Mary's Hospital has chosen not to be a Medicare certified hospice, it does have a very active hospice program. St. Mary's Hospital has chosen to use traditional Medicare Hospital/Home Health benefits rather than the Medicare Program model because the traditional method more adequately covers the cost of treating these patients and therefore increases our ability to offer the necessary services to the extent to which they are required.

It should also be noted that the Hospital is a cancer center and as such treats a very ill population referred from other rural and urban community hospitals for treatment that is not available at those locations.

While the overall predicted mortality range has gone down slightly, as has St. Mary's Hospital's rate, there have been slight increases in some diagnostic categories. This is in part attributed to the continuous trend towards outpatient treatment, thus removing the healthiest patients from the sample because they are no longer hospitalized. As this trend continues to increase over the next few years, we will see a continuous rise in mortality rates as only the severely ill will be hospitalized and their rate alone will be represented rather than the previous blend with the healthier patient population.

This hospital has chosen not to dedicate time and resources to review of the accuracy of the HCFA data. The material was verified in 1986 with a low error rate. Given the similarity in rate with the 1987 data, we see no reason to take time from other quality review projects to verify the data. We feel our commitment to quality patient care can better be actualized using our resources to carry out the quality review program designed to meet the needs of our patients and our institution.

This hospital takes the commitment to deliver quality care very seriously. For that reason, the Administration and Board support the ongoing quality review activity designed by our quality assessment professionals and the medical staff. The care delivered to each patient is reviewed to insure that care was appropriate. Seventy-five screens have been developed by our staff and are used to isolate cases that need further review and possible intervention. In this manner the care delivered by each physician and each member of the hospital's clinical staff is constantly under review to promote any change necessary in education, equipment, or personal/competence that will enhance patient care. Not only is each case where there is a death reviewed, but each patient treated in the hospital.

Christopher Carney

Christopher M. Carney
Chief Executive Officer

ST MARYS HOSP

THIRD STREET NE
NORTON, VA 24273

Medicare Hospital Provider Number: 490027

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	303	10	9 - 16	428	10	8 - 15
Cancer	9	78	20 - 74	10	50	12 - 68
Cerebrovascular Accidents	4	0	6 - 71	15	20	12 - 54
Gastrointestinal Catastrophes	1	0	1 - 97	3	33	3 - 86
Infectious Disease	2	50	3 - 92	5	20	9 - 77
Metabolic/Electrolyte Disorders	8	0	6 - 50	5	40	5 - 78
Pulmonary Disease	31	29	19 - 51	31	23	14 - 45
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	16	31	14 - 58	17	29	22 - 64
Severe Chronic Heart Disease	13	15	9 - 52	13	23	9 - 55
Severe Trauma	0	-	-	1	100	0 - 97
Gastrointestinal Disease	26	0	0 - 77	37	0	1 - 14
Gynecologic Disease	5	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	63	2	1 - 12	68	4	1 - 16
Musculoskeletal/Skin Conditions	12	8	0 - 97	13	0	0 - 93
Neuropsychiatric/Sensory Disease	5	0	0 -100	39	0	0 - 28
Urologic Disease	15	0	0 - 98	17	0	0 - 72

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	133
Occupancy Rate (%):	62
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	22
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	40
Licensed Practical Nurses:	49

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

STONEWALL JACKSON HOSPITAL

SPOTSWOOD ROAD
LEXINGTON, VA 24450

Medicare Hospital Provider Number: 490031

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	542	14	10 - 16	570	12	8 - 14
Cancer	9	78	18 - 72	10	60	10 - 66
Cerebrovascular Accidents	20	30	9 - 49	14	14	11 - 51
Gastrointestinal Catastrophes	3	0	1 - 82	6	33	3 - 74
Infectious Disease	7	43	10 - 74	3	33	1 - 87
Metabolic/Electrolyte Disorders	18	6	6 - 40	14	21	6 - 53
Pulmonary Disease	45	13	15 - 38	40	32	12 - 43
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	33	33	24 - 57	34	24	24 - 54
Severe Chronic Heart Disease	27	37	11 - 47	21	5	9 - 34
Severe Trauma	2	50	1 - 93	0	-	-
Gastrointestinal Disease	35	0	0 - 27	66	3	0 - 20
Gynecologic Disease	2	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	57	5	2 - 17	46	2	0 - 21
Musculoskeletal/Skin Conditions	63	5	0 - 37	44	0	0 - 26
Neuropsychiatric/Sensory Disease	10	0	0 - 98	4	0	0 -100
Urologic Disease	4	0	0 -100	5	20	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 130
Occupancy Rate (%): 58
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 20
Percent of Physicians Who Are Board Certified Specialists: 100
Interns and Residents: (not available)
Registered Nurses: (not available)
Licensed Practical Nurses: (not available)

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

STUART CIRCLE HOSPITAL

413-21 STUART CIRCLE
RICHMOND, VA 23220

Medicare Hospital Provider Number: 490091

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,587	10	8 - 13	1,482	10	8 - 13
Cancer	47	43	26 - 56	56	36	26 - 54
Cerebrovascular Accidents	64	31	16 - 40	70	30	15 - 38
Gastrointestinal Catastrophes	13	54	18 - 70	14	50	17 - 68
Infectious Disease	8	25	11 - 69	14	36	17 - 66
Metabolic/Electrolyte Disorders	28	25	11 - 47	20	25	10 - 51
Pulmonary Disease	65	25	12 - 35	81	26	14 - 36
Renal Failure	12	33	17 - 76	4	25	4 - 82
Severe Acute Heart Disease	41	51	24 - 56	32	22	23 - 53
Severe Chronic Heart Disease	66	21	14 - 35	62	19	14 - 35
Severe Trauma	2	50	3 - 92	5	60	5 - 78
Gastrointestinal Disease	154	3	1 - 9	119	2	1 - 8
Gynecologic Disease	31	0	0 -100	31	0	0 -100
Low-Risk Heart Disease	135	4	1 - 9	117	4	1 - 11
Musculoskeletal/Skin Conditions	241	1	1 - 5	204	0	1 - 4
Neuropsychiatric/Sensory Disease	66	3	0 - 20	85	2	0 - 16
Urologic Disease	52	0	0 - 15	56	5	0 - 48

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 153
Occupancy Rate (%): (not available)
Ownership/Control: Private, For Profit

STAFFING

Total Number of Physicians: (not available)
Percent of Physicians Who Are Board Certified Specialists: (not available)
Interns and Residents: (not available)
Registered Nurses: (not available)
Licensed Practical Nurses: (not available)

SPECIALTY SERVICES

Shock/Trauma Unit: (not available)
Burn Unit: (not available)
Medical/Surgical Intensive Care: (not available)
Cardiac Intensive Care: (not available)
Organ Transplant Service: (not available)
Hospice Care: (not available)

TAZEWELL COMM HOSP

PO BOX 607
TAZEWELL, VA 24651

Medicare Hospital Provider Number: 490117

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	457	9	7 - 14	450	9	7 - 14
Cancer	8	25	14 - 71	8	38	9 - 70
Cerebrovascular Accidents	15	27	9 - 54	7	14	6 - 64
Gastrointestinal Catastrophes	1	100	3 - 98	1	100	1 - 97
Infectious Disease	4	25	3 - 80	8	63	14 - 75
Metabolic/Electrolyte Disorders	28	21	9 - 45	13	31	7 - 58
Pulmonary Disease	25	40	10 - 49	21	33	7 - 48
Renal Failure	0	-	-	1	100	2 - 97
Severe Acute Heart Disease	17	24	16 - 57	19	21	19 - 56
Severe Chronic Heart Disease	18	22	9 - 49	30	30	10 - 44
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	39	5	0 - 59	55	2	0 - 22
Gynecologic Disease	5	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	69	1	1 - 11	52	0	1 - 10
Musculoskeletal/Skin Conditions	44	2	0 - 30	50	2	0 - 26
Neuropsychiatric/Sensory Disease	10	0	0 - 99	11	0	0 -100
Urologic Disease	9	0	0 -100	9	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	50
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	51
Percent of Physicians Who Are Board Certified Specialists:	47
Interns and Residents:	0
Registered Nurses:	41
Licensed Practical Nurses:	29

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THE FAUQUIER HOSPITAL

500 HOSPITAL DRIVE
WARRENTON, VA 22186

Medicare Hospital Provider Number: 490023

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	862	15	10 - 15	899	13	10 - 16
Cancer	20	40	25 - 68	19	47	16 - 60
Cerebrovascular Accidents	36	36	15 - 47	35	31	16 - 47
Gastrointestinal Catastrophes	7	29	10 - 72	5	40	8 - 80
Infectious Disease	13	31	14 - 64	14	36	17 - 66
Metabolic/Electrolyte Disorders	22	36	12 - 54	15	20	11 - 55
Pulmonary Disease	50	24	13 - 39	45	18	13 - 38
Renal Failure	10	30	12 - 74	8	13	7 - 69
Severe Acute Heart Disease	31	45	22 - 57	36	44	26 - 59
Severe Chronic Heart Disease	52	27	12 - 37	72	25	14 - 36
Severe Trauma	0	-	-	2	0	1 - 91
Gastrointestinal Disease	65	5	0 - 24	68	4	1 - 16
Gynecologic Disease	4	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	107	7	1 - 14	109	5	1 - 12
Musculoskeletal/Skin Conditions	97	1	0 - 11	101	2	0 - 11
Neuropsychiatric/Sensory Disease	15	7	0 - 99	19	5	0 - 84
Urologic Disease	36	0	0 - 45	32	3	0 - 56

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	95
Occupancy Rate (%):	59
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	51
Percent of Physicians Who Are Board Certified Specialists:	82
Interns and Residents:	0
Registered Nurses:	99
Licensed Practical Nurses:	29

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

TIDEWATER MEMORIAL HOSP

ROUTE 2 BOX 256
TAPPAHANNOCK, VA 22560

Medicare Hospital Provider Number: 490084

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	481	17	10 - 18	495	15	10 - 18
Cancer	4	50	12 - 87	3	67	8 - 89
Cerebrovascular Accidents	9	44	16 - 74	14	21	9 - 53
Gastrointestinal Catastrophes	1	0	2 - 97	5	40	6 - 78
Infectious Disease	14	36	16 - 65	22	27	16 - 56
Metabolic/Electrolyte Disorders	15	20	13 - 57	15	33	6 - 56
Pulmonary Disease	40	30	11 - 41	35	20	19 - 47
Renal Failure	3	0	2 - 82	3	67	7 - 89
Severe Acute Heart Disease	24	54	24 - 63	29	48	24 - 60
Severe Chronic Heart Disease	38	18	10 - 36	23	9	9 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	34	3	0 - 31	36	6	0 - 32
Gynecologic Disease	1	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	47	15	0 - 37	52	8	0 - 30
Musculoskeletal/Skin Conditions	46	4	0 - 24	34	6	0 - 60
Neuropsychiatric/Sensory Disease	16	6	0 - 96	9	0	0 -100
Urologic Disease	2	0	0 -100	5	20	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	100
Occupancy Rate (%):	37
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	19
Percent of Physicians Who Are Board Certified Specialists:	47
Interns and Residents:	0
Registered Nurses:	44
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

TWIN COUNTY COMMUNITY HOSPITAL

200 HOSPITAL DRIVE
GALAX, VA 24333

Medicare Hospital Provider Number: 490115

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,240	12	9 - 14	1,395	11	8 - 13
Cancer	15	33	16 - 63	26	58	26 - 65
Cerebrovascular Accidents	50	26	16 - 42	42	26	15 - 43
Gastrointestinal Catastrophes	5	60	6 - 78	13	31	14 - 64
Infectious Disease	11	64	12 - 66	9	22	10 - 65
Metabolic/Electrolyte Disorders	18	11	10 - 47	14	21	7 - 54
Pulmonary Disease	99	20	17 - 36	92	22	16 - 36
Renal Failure	5	80	13 - 84	0	-	-
Severe Acute Heart Disease	49	57	25 - 54	54	46	23 - 51
Severe Chronic Heart Disease	45	27	14 - 40	58	16	11 - 31
Severe Trauma	3	33	1 - 88	1	0	0 - 99
Gastrointestinal Disease	115	6	0 - 15	139	1	1 - 7
Gynecologic Disease	8	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	172	3	1 - 8	191	3	2 - 7
Musculoskeletal/Skin Conditions	133	2	1 - 7	131	1	1 - 6
Neuropsychiatric/Sensory Disease	45	0	0 - 14	63	2	0 - 17
Urologic Disease	44	0	0 - 25	59	0	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	149
Occupancy Rate (%):	55
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	36
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	90
Licensed Practical Nurses:	99

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

UN OF VA HOSP & CHILDRENS REHAB

JEFFERSON PARK AVE
CHARLOTTESVILLE, VA 22901

Medicare Hospital Provider Number: 490009

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,637	11	10 - 14	3,571	11	9 - 13
Cancer	192	30	32 - 51	190	37	33 - 53
Cerebrovascular Accidents	122	20	17 - 34	125	22	18 - 35
Gastrointestinal Catastrophes	22	36	18 - 60	29	34	15 - 53
Infectious Disease	19	63	19 - 62	14	57	13 - 64
Metabolic/Electrolyte Disorders	42	31	14 - 46	43	26	8 - 40
Pulmonary Disease	114	34	18 - 38	134	22	18 - 35
Renal Failure	28	21	7 - 57	33	21	10 - 60
Severe Acute Heart Disease	146	34	26 - 44	97	44	26 - 47
Severe Chronic Heart Disease	111	14	15 - 30	102	23	16 - 34
Severe Trauma	33	45	11 - 50	13	62	9 - 62
Gastrointestinal Disease	145	7	1 - 12	140	4	1 - 9
Gynecologic Disease	36	0	0 -100	22	0	0 -100
Low-Risk Heart Disease	481	5	3 - 7	456	5	3 - 7
Musculoskeletal/Skin Conditions	312	1	1 - 5	281	2	1 - 6
Neuropsychiatric/Sensory Disease	324	3	1 - 7	333	2	1 - 5
Urologic Disease	174	1	0 - 8	260	1	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#): 883
Ownership/Control: State Government

STAFFING

Interns and Residents: 369
Registered Nurses: 912
Licensed Practical Nurses: 135

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: Yes
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: Yes
Hospice Care: No

UNIVERSITY OF VIRGINIA HOSPITALS
CHARLOTTESVILLE, VIRGINIA 22908
(804) 924-2258

OFFICE OF THE EXECUTIVE DIRECTOR

1819

October 21, 1988

Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Sandra Kappert

The University of Virginia has always provided quality care to the patient population it serves and is committed to support all approaches to the evaluation and documentation of that quality. As part of our ongoing review process we are able to provide an independent assessment of quality parameters including morbidity and mortality statistics for all of our patients. In attempting to reproduce the 1988 HCFA Medicare mortality statistics from our files we see several significant differences between our data and those generated by HCFA. The numbers we generate for total patients and for all disease categories are significantly larger than those reported by HCFA. We are very comfortable with the accuracy of our data and believe the discrepancy is due to the fact that in the HCFA profile of patients who are ultimately readmitted to another facility are not considered even though they received major elements of care at our hospitals. While we understand the statistical problems multiple admissions may cause, we believe that the exclusion of these patients unneccessarily biases certain categories against the truly tertiary care centers that work closely with a large number of community hospitals in delivering multi-level, cost-effective family oriented health care.

We believe this biasing is particularly important in the infectious disease category of the current data set in which the University Hospital's actual mortality rate as determined by HCFA falls outside of the predicted range. The HCFA data are based on 19 patients with a total of 12 deaths. Our data indicate we have provided care for 29 Medicare patients in these diagnostic groups with the same total of 12 deaths within thirty days of admission, giving an overall mortality rate of 40% which is identical to our overall mortality rate for blood borne infections. Since the infectious disease category consists primarily of patients with significant blood borne infections which are either successfully treated or die, we believe that our larger sample of 29 patients is much more representative of the effectiveness of our care because it is unlikely that patients who have survived would be readmitted to another facility for the same infectious disease diagnosis. Thus the University hospital receives no recognition for these cases which are successfully and in most cases completely treated.

The infectious disease program at the University of Virginia is recognized world-wide as a leader in research, education and clinical service. We have full confidence in the excellence of the care provided by this group and believe that our data are more reflective of the quality of care delivered at our hospitals. We hope that HCFA will adjust their data processing capabilities to include all patients who receive care within a calendar year at a particular facility to allow for the actual quality and performance of all of our services to be appropriately documented.

Thank you for your interest and attention to our comments and concerns.

Sincerely,

John T. Ashley

John T. Ashley, M.D.
Executive Director

JTA/rlc

VIRGINIA BAPTIST HOSP DIV CENTRA HLT

3300 RIVERMONT AVE
LYNCHBURG, VA 24503

Medicare Hospital Provider Number: 490021

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,681	11	9 - 13	1,772	10	9 - 13
Cancer	87	53	28 - 53	97	46	28 - 52
Cerebrovascular Accidents	46	22	14 - 40	44	16	16 - 40
Gastrointestinal Catastrophes	17	59	13 - 60	16	31	16 - 62
Infectious Disease	22	36	15 - 57	22	23	21 - 59
Metabolic/Electrolyte Disorders	19	21	8 - 50	24	25	7 - 46
Pulmonary Disease	94	20	14 - 33	80	21	13 - 35
Renal Failure	4	50	8 - 86	7	29	8 - 76
Severe Acute Heart Disease	66	21	26 - 48	57	40	26 - 53
Severe Chronic Heart Disease	72	14	13 - 31	52	21	11 - 35
Severe Trauma	6	0	8 - 61	4	50	5 - 83
Gastrointestinal Disease	165	4	1 - 9	173	2	1 - 7
Gynecologic Disease	38	0	0 -100	27	0	0 -100
Low-Risk Heart Disease	216	3	1 - 7	175	1	2 - 6
Musculoskeletal/Skin Conditions	122	4	0 - 12	147	7	0 - 15
Neuropsychiatric/Sensory Disease	65	6	0 - 26	74	1	0 - 13
Urologic Disease	91	2	0 - 18	82	1	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	324
Occupancy Rate (%):	69
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	165
Percent of Physicians Who Are Board Certified Specialists:	96
Interns and Residents:	0
Registered Nurses:	291
Licensed Practical Nurses:	27

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

VIRGINIA BEACH GENERAL HOSP

1060 FIRST COLONIAL RD
VIRGINIA BEACH, VA 23454

Medicare Hospital Provider Number: 490057

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,088	10	9 - 13	2,019	11	9 - 13
Cancer	71	37	29 - 55	71	49	31 - 58
Cerebrovascular Accidents	65	22	17 - 38	60	15	20 - 40
Gastrointestinal Catastrophes	19	21	12 - 53	16	44	16 - 64
Infectious Disease	24	38	19 - 58	11	45	10 - 65
Metabolic/Electrolyte Disorders	21	29	10 - 52	30	33	10 - 47
Pulmonary Disease	119	26	17 - 36	115	27	14 - 34
Renal Failure	5	20	5 - 78	5	0	5 - 70
Severe Acute Heart Disease	53	26	26 - 51	58	43	25 - 52
Severe Chronic Heart Disease	86	17	14 - 31	72	24	16 - 37
Severe Trauma	2	50	1 - 93	7	14	3 - 66
Gastrointestinal Disease	163	4	1 - 9	154	3	1 - 9
Gynecologic Disease	23	0	0 -100	19	0	0 -100
Low-Risk Heart Disease	282	3	2 - 6	272	4	2 - 7
Musculoskeletal/Skin Conditions	242	2	1 - 6	226	3	0 - 7
Neuropsychiatric/Sensory Disease	61	2	1 - 13	57	4	0 - 28
Urologic Disease	69	3	0 - 24	78	1	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	230
Occupancy Rate (%):	90
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	257
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	368
Licensed Practical Nurses:	65

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

VBGH
VIRGINIA BEACH GENERAL HOSPITAL

Medicare Provider Number: 49-0057

October 21, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

Thank you for the opportunity to comment on Virginia Beach General Hospital's 1987 Medicare Hospital Mortality Information. Although we have found no discrepancies with the data, we hope HCFA will continue to refine the methodology to account for patients' severity of illness, previous admissions during the same year, and economic status. Reviewing medical records of the patients HCFA listed, we found the above factors to be important considerations for interpreting the mortality information, especially in preparation for comments to the media in December.

We do wish to rectify the 1986 AHA survey data furnished in the mortality information. Virginia Beach General Hospital has 263 licensed beds. The occupancy rate for 1986 was 75.9%. The percentage of physicians who are board certified was 84%. The RN to bed ratio was 1.15 and the LPN to bed ratio was .30. Please correct our hospital characteristics portion of the report.

Thank you for your attention. If you have any questions concerning our comments please contact Jeff Karako at (804) 496-6250.

Sincerely,

Douglas Johnson

Douglas L. Johnson, Ph.D.
President and Chief
Executive Officer
Tidewater Health Care, Inc.

WALTER REED MEMORIAL HOSPITAL

ROUTE 17
GLOUCESTER, VA 23061

Medicare Hospital Provider Number: 490130

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	733	12	10 - 16	768	16	11 - 17
Cancer	14	71	24 - 71	29	66	27 - 63
Cerebrovascular Accidents	44	18	16 - 40	33	18	13 - 41
Gastrointestinal Catastrophes	11	18	14 - 63	15	33	16 - 63
Infectious Disease	17	29	15 - 59	16	19	13 - 55
Metabolic/Electrolyte Disorders	20	30	6 - 50	13	31	8 - 59
Pulmonary Disease	47	17	14 - 38	43	33	13 - 43
Renal Failure	5	20	6 - 78	7	14	15 - 78
Severe Acute Heart Disease	27	44	17 - 55	40	52	24 - 55
Severe Chronic Heart Disease	31	19	10 - 40	45	18	15 - 39
Severe Trauma	0	-	-	1	0	0 - 99
Gastrointestinal Disease	53	2	0 - 17	52	6	1 - 21
Gynecologic Disease	6	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	85	4	2 - 12	88	1	1 - 9
Musculoskeletal/Skin Conditions	57	5	1 - 17	61	7	1 - 19
Neuropsychiatric/Sensory Disease	22	0	1 - 26	21	5	0 - 95
Urologic Disease	27	0	0 - 29	20	0	0 - 69

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	71
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	51
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

WARREN MEMORIAL HOSPITAL

1000 SHENANDOAH AVE
FRONT ROYAL, VA 22630

Medicare Hospital Provider Number: 490033

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	577	15	9 - 16	636	15	9 - 15
Cancer	10	50	16 - 73	19	37	22 - 65
Cerebrovascular Accidents	30	47	12 - 47	29	28	13 - 47
Gastrointestinal Catastrophes	3	67	2 - 86	2	100	5 - 89
Infectious Disease	8	25	13 - 71	6	17	9 - 71
Metabolic/Electrolyte Disorders	8	38	2 - 70	5	40	2 - 79
Pulmonary Disease	40	38	11 - 42	32	31	10 - 44
Renal Failure	3	0	3 - 81	4	25	14 - 91
Severe Acute Heart Disease	29	34	20 - 55	26	46	19 - 57
Severe Chronic Heart Disease	29	28	9 - 43	30	30	9 - 43
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	55	4	1 - 17	49	4	0 - 25
Gynecologic Disease	8	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	74	1	1 - 10	69	4	1 - 15
Musculoskeletal/Skin Conditions	53	4	0 - 27	62	2	0 - 14
Neuropsychiatric/Sensory Disease	9	0	0 - 92	15	0	0 - 96
Urologic Disease	26	0	0 - 68	27	0	0 - 85

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 112
Occupancy Rate (%): 68
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 41
Percent of Physicians Who Are Board Certified Specialists: 71
Interns and Residents: 0
Registered Nurses: 60
Licensed Practical Nurses: 26

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

WAYNESBORO COMMUNITY HOSP

501 OAK AVE
WAYNESBORO, VA 22980

Medicare Hospital Provider Number: 490018

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,198	12	9 - 14	1,197	13	9 - 14
Cancer	23	70	26 - 64	31	71	26 - 60
Cerebrovascular Accidents	47	26	14 - 40	55	33	16 - 42
Gastrointestinal Catastrophes	8	13	16 - 68	7	29	4 - 69
Infectious Disease	8	38	8 - 70	8	50	4 - 69
Metabolic/Electrolyte Disorders	26	35	10 - 49	37	19	9 - 40
Pulmonary Disease	65	31	16 - 41	81	19	14 - 34
Renal Failure	3	67	10 - 93	3	67	8 - 90
Severe Acute Heart Disease	43	37	22 - 52	76	39	26 - 50
Severe Chronic Heart Disease	89	25	13 - 32	65	29	12 - 35
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	116	3	0 - 14	101	2	1 - 10
Gynecologic Disease	7	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	97	5	1 - 14	112	2	1 - 8
Musculoskeletal/Skin Conditions	151	1	1 - 7	139	2	0 - 10
Neuropsychiatric/Sensory Disease	37	5	0 - 65	35	3	0 - 54
Urologic Disease	49	4	0 - 51	49	2	0 - 42

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 171
Occupancy Rate (%): 49
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 50
Percent of Physicians Who Are Board Certified Specialists: 92
Interns and Residents: 0
Registered Nurses: 103
Licensed Practical Nurses: 61

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

WESTERN STATE HOSP

PO BOX 2500
STAUNTON, VA 24401

Medicare Hospital Provider Number: 490106

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	129	6	5 - 15	120	8	8 - 19
Cancer	0	-	-	1	100	0 - 99
Cerebrovascular Accidents	2	0	3 - 88	1	0	0 -100
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	1	100	0 - 99	1	100	0 - 99
Metabolic/Electrolyte Disorders	7	14	2 - 67	10	10	7 - 54
Pulmonary Disease	28	7	9 - 34	21	19	11 - 47
Renal Failure	3	0	0 - 99	1	100	1 - 97
Severe Acute Heart Disease	1	100	0 - 98	1	0	3 - 98
Severe Chronic Heart Disease	1	0	0 - 98	0	-	-
Severe Trauma	0	-	-	1	0	2 - 97
Gastrointestinal Disease	0	-	-	0	-	-
Gynecologic Disease	0	-	-	2	0	0 -100
Low-Risk Heart Disease	1	0	0 -100	6	17	0 - 85
Musculoskeletal/Skin Conditions	8	0	0 -100	10	0	0 -100
Neuropsychiatric/Sensory Disease	32	0	0 - 88	18	0	0 - 96
Urologic Disease	0	-	-	2	0	5 - 89

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	700
Occupancy Rate (%):	90
Ownership/Control:	State Government

STAFFING

Total Number of Physicians:	41
Percent of Physicians Who Are Board Certified Specialists:	63
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

COMMONWEALTH of VIRGINIA

L. F. HARDING, M.H.A.
DIRECTOR

GLENN YANK, M.D.
DIRECTOR, MEDICAL SERVICES

Department of
Mental Health, Mental Retardation and Substance Abuse Services

WESTERN STATE HOSPITAL
BOX 2500
STAUNTON, VIRGINIA 24401-1405
(703) 332-8000

September 20, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Hospital ID Number 490106

Dear Ms. Kappert

Please note that the hospital characteristics for this facility are inaccurate and should be corrected. The data should reflect our 26 bed Medical Acute Care Unit, as indicated below.

Staffing:

Total Number of Physicians	2	(not 21)
Percent of Physicians who are board certified specialists	2	(not 38)
Interns and Residents	0	(not .08)
Registered Nurses per bed	2.36	(not 3.65)
LPN's per bed	2.60	(not 2.38)

Sincerely

David Colton

David Colton
Assistant Administrator
Clinical & Support Services

DC/lpc

WILLIAMSBURG COMMUNITY HOSPITAL

1238 MOUNT VERNON AVENUE
WILLIAMSBURG, VA 23185

Medicare Hospital Provider Number: 490066

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	993	11	8 - 13	975	10	8 - 13
Cancer	24	42	24 - 64	35	54	26 - 61
Cerebrovascular Accidents	41	29	14 - 43	32	9	13 - 37
Gastrointestinal Catastrophes	5	0	10 - 67	8	38	9 - 71
Infectious Disease	5	40	5 - 78	9	22	13 - 68
Metabolic/Electrolyte Disorders	24	29	9 - 49	15	40	9 - 58
Pulmonary Disease	59	22	12 - 36	50	20	13 - 38
Renal Failure	2	50	6 - 95	4	75	13 - 90
Severe Acute Heart Disease	39	36	22 - 53	37	30	24 - 54
Severe Chronic Heart Disease	45	20	12 - 37	36	14	12 - 37
Severe Trauma	4	75	5 - 80	1	0	0 - 99
Gastrointestinal Disease	103	2	1 - 10	103	4	0 - 13
Gynecologic Disease	10	0	0 -100	10	0	0 -100
Low-Risk Heart Disease	96	4	1 - 13	107	4	0 - 12
Musculoskeletal/Skin Conditions	122	2	0 - 11	100	1	0 - 9
Neuropsychiatric/Sensory Disease	30	0	0 - 29	34	0	0 - 35
Urologic Disease	49	2	0 - 27	57	0	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	100
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	69
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	0
Registered Nurses:	128
Licensed Practical Nurses:	30

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WINCHESTER MED CNTR INC

SOUTH STEWART ST
WINCHESTER, VA 22601

Medicare Hospital Provider Number: 490005

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,072	10	9 - 13	3,003	10	9 - 13
Cancer	131	37	28 - 49	108	45	29 - 52
Cerebrovascular Accidents	153	22	19 - 34	133	23	17 - 33
Gastrointestinal Catastrophes	21	48	15 - 59	20	45	11 - 56
Infectious Disease	44	16	20 - 46	41	34	18 - 51
Metabolic/Electrolyte Disorders	36	8	14 - 40	33	15	8 - 39
Pulmonary Disease	125	25	16 - 35	157	18	16 - 32
Renal Failure	10	40	8 - 72	14	50	15 - 75
Severe Acute Heart Disease	112	37	27 - 47	99	34	26 - 47
Severe Chronic Heart Disease	167	20	16 - 30	205	17	17 - 29
Severe Trauma	3	33	1 - 89	6	0	6 - 60
Gastrointestinal Disease	218	1	1 - 6	195	1	1 - 6
Gynecologic Disease	21	0	0 -100	29	0	0 - 96
Low-Risk Heart Disease	432	3	2 - 6	360	2	1 - 5
Musculoskeletal/Skin Conditions	312	1	1 - 5	344	2	1 - 5
Neuropsychiatric/Sensory Disease	71	0	0 - 10	82	4	0 - 16
Urologic Disease	141	0	0 - 6	133	2	0 - 12

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 352
Occupancy Rate (%): 74
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 126
Percent of Physicians Who Are Board Certified Specialists: 85
Interns and Residents: 0
Registered Nurses: 309
Licensed Practical Nurses: 57

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

WISE APPALACHIAN REGIONAL HOSPITAL

WISE, VA 24293

Medicare Hospital Provider Number: 490010

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	429	6	9 - 14	405	9	8 - 14
Cancer	4	0	18 - 81	5	40	16 - 87
Cerebrovascular Accidents	5	0	7 - 64	8	13	11 - 63
Gastrointestinal Catastrophes	5	40	4 - 78	4	25	4 - 80
Infectious Disease	7	14	14 - 70	2	0	5 - 89
Metabolic/Electrolyte Disorders	4	0	10 - 74	12	17	6 - 54
Pulmonary Disease	30	17	14 - 43	28	14	14 - 43
Renal Failure	0	-	-	1	0	0 - 98
Severe Acute Heart Disease	24	17	22 - 54	17	29	18 - 60
Severe Chronic Heart Disease	12	25	10 - 58	15	27	13 - 57
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	48	0	1 - 12	35	0	1 - 16
Gynecologic Disease	4	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	50	0	0 - 14	48	2	0 - 21
Musculoskeletal/Skin Conditions	49	2	0 - 26	42	2	0 - 44
Neuropsychiatric/Sensory Disease	6	0	0 -100	19	0	0 - 69
Urologic Disease	23	4	0 - 74	21	0	0 - 75

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	67
Occupancy Rate (%):	45
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	18
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	29
Licensed Practical Nurses:	28

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

WYTHE CNTY COMM HOSP

600 W RIDGE RD
WYTHEVILLE, VA 24382

Medicare Hospital Provider Number: 490111

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	732	15	12 - 19	652	14	12 - 18
Cancer	10	60	21 - 77	9	44	21 - 79
Cerebrovascular Accidents	33	27	14 - 45	35	20	16 - 43
Gastrointestinal Catastrophes	9	56	14 - 73	8	38	9 - 71
Infectious Disease	13	54	19 - 70	5	60	13 - 84
Metabolic/Electrolyte Disorders	16	31	6 - 54	25	24	13 - 50
Pulmonary Disease	124	21	17 - 35	116	16	16 - 33
Renal Failure	11	73	16 - 76	4	75	7 - 84
Severe Acute Heart Disease	36	39	23 - 56	34	41	26 - 59
Severe Chronic Heart Disease	53	26	15 - 40	53	23	10 - 34
Severe Trauma	0	-	-	1	0	0 - 97
Gastrointestinal Disease	73	3	0 - 15	45	7	0 - 41
Gynecologic Disease	6	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	100	3	1 - 10	67	1	1 - 11
Musculoskeletal/Skin Conditions	45	2	1 - 17	29	0	0 - 33
Neuropsychiatric/Sensory Disease	17	6	0 - 83	26	0	0 - 43
Urologic Disease	27	0	0 - 24	26	4	0 - 71

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 106
Occupancy Rate (%): 49
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 25
Percent of Physicians Who Are Board Certified Specialists: 76
Interns and Residents: 0
Registered Nurses: 61
Licensed Practical Nurses: 21

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

WYTHEVILLE HOSP CORP

2505 E MAIN ST
WYTHEVILLE, VA 24382

Medicare Hospital Provider Number: 490078

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	97	8	6 - 18	133	7	5 - 15
Cancer	1	0	2 - 97	0	-	-
Cerebrovascular Accidents	4	0	3 - 71	1	100	0 - 98
Gastrointestinal Catastrophes	1	100	2 - 98	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	1	0	0 - 98	1	0	0 -100
Pulmonary Disease	19	5	9 - 38	16	13	7 - 45
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	1	0	0 - 98	3	33	4 - 86
Severe Chronic Heart Disease	9	11	4 - 55	8	0	6 - 48
Severe Trauma	0	-	-	1	0	0 -100
Gastrointestinal Disease	6	0	0 -100	18	6	0 - 93
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	12	0	0 - 71	11	9	0 - 99
Musculoskeletal/Skin Conditions	10	10	0 -100	16	0	0 - 74
Neuropsychiatric/Sensory Disease	0	-	-	3	0	0 -100
Urologic Disease	2	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	54
Ownership/Control:	Private, Non-profit

STAFFING

Interns and Residents:	0
Registered Nurses:	9
Licensed Practical Nurses:	7

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ARACOMA MEDICAL FOUNDATION INC

396 DINGESS ST
LOGAN, WV 25601

Medicare Hospital Provider Number: 510004

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	51	14	5 - 26	105	19	8 - 24
Cancer	0	-	-	4	50	9 - 85
Cerebrovascular Accidents	0	-	-	4	25	5 - 80
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	1	0	0 -100
Metabolic/Electrolyte Disorders	2	50	2 - 92	1	0	0 -100
Pulmonary Disease	12	42	8 - 61	24	33	9 - 48
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	2	100	6 - 89
Severe Chronic Heart Disease	2	0	0 - 94	12	25	7 - 57
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	2	0	0 -100	4	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	3	0	0 -100	14	7	0 - 93
Musculoskeletal/Skin Conditions	1	0	0 -100	2	0	0 -100
Neuropsychiatric/Sensory Disease	4	0	0 -100	4	0	0 -100
Urologic Disease	3	0	0 -100	3	33	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	20
Occupancy Rate (%):	40
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	45
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	13
Licensed Practical Nurses:	10

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BECKLEY APPALACHIAN REG HOSP

306 STANAFORD RD
BECKLEY, WV 25801

Medicare Hospital Provider Number: 510062

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	933	10	7 - 12	871	12	7 - 13
Cancer	21	48	21 - 63	20	45	20 - 63
Cerebrovascular Accidents	34	35	14 - 46	31	42	14 - 48
Gastrointestinal Catastrophes	7	14	16 - 72	6	33	6 - 74
Infectious Disease	5	20	7 - 75	6	0	13 - 63
Metabolic/Electrolyte Disorders	8	25	5 - 66	9	67	11 - 69
Pulmonary Disease	43	30	13 - 42	43	42	13 - 44
Renal Failure	3	67	10 - 93	2	50	4 - 93
Severe Acute Heart Disease	33	42	22 - 56	38	39	21 - 53
Severe Chronic Heart Disease	39	15	10 - 35	41	15	13 - 36
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	66	5	0 - 26	47	2	0 - 23
Gynecologic Disease	2	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	71	3	1 - 13	85	2	1 - 11
Musculoskeletal/Skin Conditions	24	0	1 - 21	30	7	0 - 63
Neuropsychiatric/Sensory Disease	325	2	0 - 6	269	2	0 - 6
Urologic Disease	14	0	1 - 36	13	8	1 - 52

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	202
Occupancy Rate (%):	37
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	45
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	49
Licensed Practical Nurses:	37

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

BECKLEY HOSP

1007 SOUTH OAKWOOD AVE
BECKLEY, WV 25801

Medicare Hospital Provider Number: 510066

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	897	16	9 - 15	924	19	11 - 17
Cancer	24	63	25 - 64	17	65	28 - 72
Cerebrovascular Accidents	46	39	14 - 43	42	48	17 - 47
Gastrointestinal Catastrophes	6	33	14 - 80	8	50	11 - 73
Infectious Disease	12	17	7 - 54	7	43	8 - 73
Metabolic/Electrolyte Disorders	11	36	8 - 63	14	43	8 - 59
Pulmonary Disease	68	22	12 - 35	88	31	15 - 37
Renal Failure	3	67	11 - 93	11	55	20 - 83
Severe Acute Heart Disease	48	48	23 - 53	66	39	25 - 50
Severe Chronic Heart Disease	57	30	12 - 36	53	36	12 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	66	6	0 - 21	56	4	0 - 24
Gynecologic Disease	1	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	213	4	1 - 8	161	2	2 - 8
Musculoskeletal/Skin Conditions	48	0	0 - 14	46	4	0 - 53
Neuropsychiatric/Sensory Disease	14	14	0 - 83	38	5	0 - 68
Urologic Disease	39	0	0 - 28	32	3	0 - 76

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 94
Occupancy Rate (%): 55
Ownership/Control: Private, For Profit

STAFFING

Total Number of Physicians: 26
Percent of Physicians Who Are Board Certified Specialists: (not available)
Interns and Residents: 0
Registered Nurses: 38
Licensed Practical Nurses: 41

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

Beckley Hospital, Inc.

1007 S. OAKWOOD AVENUE
BECKLEY, WEST VIRGINIA 25801
(304) 256-1200

October 20, 1988

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Mrs. Kappert:

This is to respond to the Medicare Hospital Mortality Information Report for 1987. We have noted several deficiencies in the data regarding our hospital characteristics reported by the American Hospital Association survey of 1986. We would also like to comment on the mortality rates reported for 1986 and 1987.

According to AHA, our facility is only operating 85 beds with no coronary or special care unit. This is not correct. We have a total of 94 beds, which include a special care unit. It is also incorrect to state that we do not have any board certified specialists as we have 42 board certified specialists on staff. We also participate in an organ procurement service.

We would also like to have noted that while our overall rate is 1% over the predicted mortality range rate, the individual rates for each of the 16 categories is within the predicted range. It is unclear how we can be within the ranges for these categories and over the predicted range for the overall total.

We would also like to note that on the first 1986 mortality report, the Health Care Financing Administration listed 906 deaths for our facility. The same period was reported to be 924 deaths in this second report. It is also unclear why the same year would have two different totals of reported deaths in 1986.

It is our opinion that there are too many faults with the reported data for this report to be a clear indication of a facility's quality of care or to determine an actual mortality rate. In addition to the reported hospital characteristics information, average patient age and a severity of illness index should be added so that facilities with similar demographics can be compared more accurately.

Sincerely,

A. M. Tieche

A. M. Tieche,
Administrator

BLUEFIELD COMM HOSP

500 CHERRY ST
BLUEFIELD, WV 24701

Medicare Hospital Provider Number: 510071

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,671	13	10 - 15	1,680	12	10 - 14
Cancer	73	53	30 - 57	64	55	33 - 60
Cerebrovascular Accidents	66	23	15 - 37	53	17	15 - 37
Gastrointestinal Catastrophes	10	60	8 - 66	12	33	16 - 67
Infectious Disease	32	38	18 - 54	18	28	14 - 57
Metabolic/Electrolyte Disorders	21	29	7 - 50	19	11	10 - 45
Pulmonary Disease	88	31	17 - 39	98	27	17 - 37
Renal Failure	9	44	10 - 75	4	50	4 - 84
Severe Acute Heart Disease	88	31	26 - 48	82	34	28 - 51
Severe Chronic Heart Disease	59	24	14 - 37	56	27	14 - 39
Severe Trauma	2	50	1 - 93	2	0	1 - 89
Gastrointestinal Disease	154	1	1 - 7	137	4	1 - 10
Gynecologic Disease	18	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	184	4	2 - 9	174	3	1 - 8
Musculoskeletal/Skin Conditions	140	2	0 - 10	145	3	0 - 10
Neuropsychiatric/Sensory Disease	49	0	1 - 11	80	1	0 - 12
Urologic Disease	76	0	0 - 12	76	1	0 - 14

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	265
Occupancy Rate (%):	53
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	70
Percent of Physicians Who Are Board Certified Specialists:	86
Interns and Residents:	0
Registered Nurses:	186
Licensed Practical Nurses:	72

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

510071

Bluefield Community Hospital

500 Cherry St. • Bluefield, West Virginia 24701 • (304) 327-2511

October 18, 1988

William L. Roper, M. D., Administrator
Health Standards And Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Dear Doctor Roper:

We have reviewed our mortality profile and verified the patient listings enclosed. Three cases were identified where the date of death was incorrect, but the cases would have been included as the patients expired within 30 days of admission. While we have no complaint with the data itself, we fail to understand how this statistical data can be interpreted as a measure of quality care. We also fail to see the benefit of this information for beneficiaries.

It would appear that the information would be better utilized by state PRO's and hospitals to identify potential quality care problems. Our hospital did not fall out of the predicted range in any category. However, we feel many factors influence a facility's mortality rate. Severity of illness is a major factor to be considered as well as the capabilities of a given facility. Until factors such as these can be identified and recognized, a comparison of mortality rates by facility seems ludicrous and may be misleading from a beneficiary standpoint.

We appreciate the opportunity to comment prior to the publication of this data.

Jay Valeyko

Jay F. Valeyko
Administrator

BOONE MEMORIAL HOSP

701 MADISON AVE
MADISON , WV 25130

Medicare Hospital Provider Number: 510015

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	277	19	10 - 20	244	17	9 - 19
Cancer	9	67	17 - 74	5	80	18 - 85
Cerebrovascular Accidents	8	25	8 - 66	10	30	11 - 65
Gastrointestinal Catastrophes	1	0	1 - 97	2	50	1 - 93
Infectious Disease	3	33	7 - 88	10	10	14 - 60
Metabolic/Electrolyte Disorders	4	0	1 - 77	5	0	3 - 64
Pulmonary Disease	34	32	15 - 48	28	39	9 - 46
Renal Failure	1	100	1 - 97	0	-	-
Severe Acute Heart Disease	9	56	15 - 73	10	40	17 - 72
Severe Chronic Heart Disease	22	32	9 - 48	6	33	5 - 73
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	18	0	0 - 60	16	0	0 - 78
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	42	5	0 - 24	42	7	0 - 34
Musculoskeletal/Skin Conditions	17	0	0 - 41	15	0	0 -100
Neuropsychiatric/Sensory Disease	3	0	0 -100	3	0	0 -100
Urologic Disease	8	0	0 - 75	10	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 38
Occupancy Rate (%): 37
Ownership/Control: Local Government

STAFFING

Total Number of Physicians: 33
Percent of Physicians Who Are Board Certified Specialists: 76
Interns and Residents: 0
Registered Nurses: 15
Licensed Practical Nurses: 7

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: No
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

BRAXTON COUNTY MEMORIAL HOSP

100 HAYLMAN DRIVE
GASSAWAY , WV 26624

Medicare Hospital Provider Number: 510084

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	287	16	11 - 20	306	14	11 - 20
Cancer	3	33	10 - 90	4	75	15 - 88
Cerebrovascular Accidents	11	27	7 - 59	14	14	15 - 55
Gastrointestinal Catastrophes	3	33	5 - 87	0	-	-
Infectious Disease	10	60	13 - 69	7	43	10 - 74
Metabolic/Electrolyte Disorders	2	0	5 - 89	7	71	8 - 71
Pulmonary Disease	23	35	14 - 53	34	26	19 - 50
Renal Failure	2	100	8 - 93	2	100	10 - 95
Severe Acute Heart Disease	18	39	19 - 63	16	38	23 - 68
Severe Chronic Heart Disease	23	22	10 - 45	18	28	6 - 49
Severe Trauma	1	100	2 - 97	0	-	-
Gastrointestinal Disease	27	0	0 - 36	22	0	0 - 56
Gynecologic Disease	1	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	53	4	0 - 20	65	3	1 - 15
Musculoskeletal/Skin Conditions	18	6	0 - 96	28	4	1 - 29
Neuropsychiatric/Sensory Disease	8	0	0 -100	5	0	0 - 99
Urologic Disease	4	0	0 -100	5	20	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	30
Occupancy Rate (%):	47
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	9
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

BROADDUS HOSP ASSN INC

COLLEGE HILL
PHILIPPI , WV 26416

Medicare Hospital Provider Number: 510009

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	479	13	10 - 17	510	10	9 - 16
Cancer	7	14	15 - 71	10	40	23 - 78
Cerebrovascular Accidents	15	40	12 - 59	16	44	9 - 56
Gastrointestinal Catastrophes	6	0	9 - 61	4	25	6 - 81
Infectious Disease	9	44	15 - 73	12	33	17 - 69
Metabolic/Electrolyte Disorders	9	44	9 - 69	3	0	4 - 79
Pulmonary Disease	38	29	18 - 49	40	17	18 - 44
Renal Failure	1	0	0 - 98	1	100	0 -100
Severe Acute Heart Disease	23	43	23 - 62	17	53	24 - 69
Severe Chronic Heart Disease	22	27	8 - 46	19	26	7 - 48
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	43	9	0 - 52	46	2	0 - 22
Gynecologic Disease	3	0	0 -100	6	0	0 -100
Low-Risk Heart Disease	79	0	1 - 7	88	2	1 - 10
Musculoskeletal/Skin Conditions	30	0	0 - 60	34	3	0 - 34
Neuropsychiatric/Sensory Disease	13	0	0 -100	21	0	0 - 89
Urologic Disease	13	0	0 -100	15	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	61
Occupancy Rate (%):	51
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	39
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CABELL-HUNTINGTON HOSPITAL, INC.

1340 HAL GREER BLVD
HUNTINGTON, WV 25701

Medicare Hospital Provider Number: 510055

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,278	14	10 - 14	2,374	14	10 - 15
Cancer	62	52	25 - 52	78	50	29 - 55
Cerebrovascular Accidents	121	27	18 - 35	101	32	20 - 40
Gastrointestinal Catastrophes	23	30	16 - 56	15	33	12 - 61
Infectious Disease	22	41	17 - 59	31	42	22 - 59
Metabolic/Electrolyte Disorders	34	26	12 - 46	37	24	9 - 42
Pulmonary Disease	152	22	18 - 35	128	24	18 - 37
Renal Failure	11	9	10 - 64	15	40	18 - 76
Severe Acute Heart Disease	88	42	28 - 51	109	41	28 - 49
Severe Chronic Heart Disease	111	29	14 - 32	118	22	14 - 31
Severe Trauma	7	29	7 - 71	4	0	3 - 72
Gastrointestinal Disease	159	4	1 - 9	150	3	1 - 9
Gynecologic Disease	32	0	0 -100	29	0	0 -100
Low-Risk Heart Disease	277	5	2 - 8	283	3	2 - 7
Musculoskeletal/Skin Conditions	209	2	0 - 7	218	2	1 - 7
Neuropsychiatric/Sensory Disease	57	2	0 - 18	48	4	0 - 24
Urologic Disease	100	2	0 - 11	121	6	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	322
Occupancy Rate (%):	64
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	259
Percent of Physicians Who Are Board Certified Specialists:	69
Interns and Residents:	0
Registered Nurses:	330
Licensed Practical Nurses:	78

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	Yes
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CABELL HUNTINGTON HOSPITAL

Medicare # 510055

October 20, 1988

We at Cabell Huntington Hospital recognize that quality patient care is difficult to measure accurately, and we conduct an ongoing program to assure that patient care rendered here meets the standards of care expected at a tertiary care facility, such as ours. We conduct regular, intensive peer review of cases where the patient died at our facility to determine if any quality of care issues need be investigated, or if appropriate action is required. This screening of the data is required before anyone can begin to make statements regarding quality of care.

The data presented by HCFA is an unvalidated, unreviewed collection of information which, if considered without appropriate review, would lead to erroneous conclusions regarding the quality of care at hospitals. There are many errors in the HCFA Mortality data which make it unreliable. Such errors include:

1. The data presented for 1986 mortality shows 2374 Medicare patients at this hospital, an increase of 29 from the data presented in last year's Mortality Report.

2. Hospital statistics from the 1986 AHA Survey are inaccurately presented in the HCFA report. We have 305 total beds(excluding bassinets) not 191 as they report. We are a teaching hospital with residents affiliated from John Marshall Medical School,and the ratio per bed is 0.08(25.2 FTE). The nurse(RN and LPN) ratios are also in error. We do provide Hospice care as part of our services, and reported such in the AHA report. We do not have a separate Coronary Care Unit, but a combined Critical Care Unit. Neither of these facts was acknowledged in the HCFA report.

3. There are numerous errors in the detailed data which was provided to us by HCFA. We reviewed all cases where the patient was reported to have died, regardless of the time period. We found in this sample errors in dates of death, dates of discharge and principal diagnosis. The error rate was 9.4% in this sample.

4. Review of the records revealed even more questions regarding the grouping methodology used by HCFA in this report. How can deaths which occurred outside the hospital be considered as part of our Mortality report. We do not have access to this data and cannot review these cases. 11.6% of the deaths included in our data occurred outside the hospital. We determined from our review that 6.3% of the deaths occurring outside the hospital were patients transferred to nursing homes for the terminal phase of their illness, with death an expected outcome.

Errors such as this indicate the serious shortcomings in HCFA's data, and emphasize the need for review before making quality of care decisions.

We also question the validity of the grouping of patients according to the last principal diagnosis. Many of the patients reviewed here were treated on previous admissions for other major diseases, which are the underlying cause of their ultimate demise. Examples include: Chronic Renal Failure patients who came in under a different principal diagnosis for their last hospital stay. Patients with Cancer of the prostate, bladder, breast, uterus, etc. are grouped under "All Other Causes", rather than Cancer. Patients with Acute Myocardial Infarctions, who had a different principal diagnosis. The HCFA grouping presents an inaccurate classification system, which shall lead the uninformed to make incorrect assumptions.

Cabell Huntington Hospital is a tertiary care institution with a significant referral base from outlying primary care facilities. We operate a Trauma service with helicopter onsite to transport and care for critically ill patients. This more complex patient mix will result in a higher mortality rate than many similar hospitals. Yet our rate is within the predicted ranges in every category and below the midpoint in 10 of the 16 groups reported by HCFA. We feel that use of the total discharges of Medicare patients and the Mortality rate for this group would be a more accurate measurement of a facility, if mortality rate is to be used as HCFA intends. In 1987 at CHH we had 3540 Medicare discharges with a mortality rate of 7.4%, a significantly lower rate than that reported by HCFA.

Mortality review is a beginning point for conducting valid quality reviews. Many other criteria must be considered before conclusions can be drawn with a reasonable degree of confidence. Mortality data as reported by HCFA does not accurately represent the actual patient experience at a hospital. Review to more accurately present the data and group the patients accordingly is necessary before you can make any determination of this or any hospitals' mortality rate. Our preliminary review indicates that death was the expected outcome in most of the patients reported here. Ongoing studies on mortality, continued stay, frequency of admission, specific diagnosis groups, etc. are only a part of the efforts to assure that the quality of care rendered here meets accepted criteria.

CALHOUN GENERAL HOSPITAL COUNTY INC

PO BOX 130
GRANTSVILLE, WV 26147

Medicare Hospital Provider Number: 510063

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	268	13	11 - 20	259	13	11 - 20
Cancer	9	67	20 - 77	6	67	20 - 85
Cerebrovascular Accidents	5	20	6 - 74	10	30	9 - 63
Gastrointestinal Catastrophes	2	50	4 - 92	4	50	11 - 86
Infectious Disease	5	40	11 - 81	1	0	1 - 97
Metabolic/Electrolyte Disorders	0	-	-	8	38	7 - 69
Pulmonary Disease	49	20	13 - 38	39	18	10 - 37
Renal Failure	1	100	2 - 97	0	-	-
Severe Acute Heart Disease	17	12	20 - 55	14	14	18 - 58
Severe Chronic Heart Disease	22	23	9 - 45	20	20	10 - 47
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	29	0	1 - 19	28	0	0 - 27
Gynecologic Disease	7	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	38	3	0 - 27	26	0	0 - 29
Musculoskeletal/Skin Conditions	11	0	0 - 96	19	0	0 - 49
Neuropsychiatric/Sensory Disease	1	0	0 -100	4	0	0 -100
Urologic Disease	11	9	0 - 99	13	8	0 - 74

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	45
Occupancy Rate (%):	50
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	9
Percent of Physicians Who Are Board Certified Specialists:	33
Interns and Residents:	0
Registered Nurses:	11
Licensed Practical Nurses:	9

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

CAMDEN CLARK MEMORIAL HOSP

800 GARFIELD AVE
PARKERSBURG, WV 26105

Medicare Hospital Provider Number: 510058

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,561	14	11 - 15	2,520	15	11 - 15
Cancer	139	42	35 - 57	92	52	34 - 58
Cerebrovascular Accidents	98	33	19 - 39	116	40	20 - 40
Gastrointestinal Catastrophes	19	32	11 - 55	23	39	19 - 60
Infectious Disease	32	25	20 - 54	33	45	21 - 58
Metabolic/Electrolyte Disorders	30	33	16 - 53	36	22	12 - 45
Pulmonary Disease	145	30	19 - 37	137	32	19 - 38
Renal Failure	12	50	16 - 77	6	33	19 - 89
Severe Acute Heart Disease	103	36	26 - 47	107	35	29 - 49
Severe Chronic Heart Disease	117	24	16 - 33	112	26	16 - 34
Severe Trauma	3	67	5 - 87	4	25	3 - 80
Gastrointestinal Disease	226	5	1 - 9	247	2	1 - 6
Gynecologic Disease	36	0	0 -100	39	0	0 -100
Low-Risk Heart Disease	266	4	2 - 7	228	4	2 - 8
Musculoskeletal/Skin Conditions	255	2	1 - 6	250	3	1 - 7
Neuropsychiatric/Sensory Disease	79	5	0 - 18	71	3	0 - 17
Urologic Disease	111	3	0 - 17	122	2	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	259
Occupancy Rate (%):	76
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	87
Percent of Physicians Who Are Board Certified Specialists:	57
Interns and Residents:	0
Registered Nurses:	161
Licensed Practical Nurses:	65

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

CHARLESTON AREA MEDICAL CTR

BROOKS AND WASHINGTON ST
CHARLESTON , WV 25325

Medicare Hospital Provider Number: 510022

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	6,799	12	9 - 13	6,517	12	10 - 13
Cancer	262	46	31 - 49	260	38	30 - 49
Cerebrovascular Accidents	238	29	18 - 32	223	33	20 - 34
Gastrointestinal Catastrophes	63	33	21 - 50	50	40	19 - 51
Infectious Disease	78	45	23 - 50	53	30	23 - 52
Metabolic/Electrolyte Disorders	60	27	13 - 41	74	23	13 - 39
Pulmonary Disease	270	24	19 - 34	257	21	19 - 34
Renal Failure	47	32	16 - 62	36	39	20 - 70
Severe Acute Heart Disease	290	39	28 - 43	292	34	30 - 45
Severe Chronic Heart Disease	263	29	17 - 30	237	30	17 - 31
Severe Trauma	22	32	9 - 52	25	28	11 - 52
Gastrointestinal Disease	423	3	1 - 6	390	3	2 - 6
Gynecologic Disease	62	3	0 - 95	32	0	0 -100
Low-Risk Heart Disease	1,190	3	2 - 5	1,066	4	2 - 5
Musculoskeletal/Skin Conditions	630	2	1 - 5	624	2	1 - 5
Neuropsychiatric/Sensory Disease	253	2	1 - 7	244	1	1 - 5
Urologic Disease	318	1	0 - 5	248	2	1 - 6

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	962
Occupancy Rate (%):	71
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	364
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	98
Registered Nurses:	1,089
Licensed Practical Nurses:	158

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

CHARLESTON
AREA
MEDICAL
CENTER

501 Morris Street • P.O. Box 1547
Charleston, West Virginia 25326 • 304/348-7627

PROVIDER NUMBER: 510022

The Charleston Area Medical Center, West Virginia's largest and most comprehensive health care facility is a 962 bed, voluntary not-for-profit health care organization. The Charleston Area Medical Center is both a general hospital and a regional referral center. Our commitment to the community and our state is evidenced by the large amount of charity care provided by our institution.

The Charleston Area Medical Center is a teaching facility associated with the West Virginia University Medical Center, Charleston Division which provides not only primary health care but also highly specialized and sophisticated services including comprehensive emergency and emergency helicopter transport services.

The Charleston Area Medical Center offers a high technical level for the diagnosis and treatment of disease. We offer diagnostic tools such as Magnetic Resonance Imaging (MRI) and sophisticated treatment such as Extracorporeal Shock Wave Lithotripsy (ESWL). Charleston Area Medical Center also provides renal transplant services in a joint venture with the Cleveland Clinic Foundation. Patients no longer need to travel out of this area for this vital service.

The Charleston Area Medical Center Heart Institute is a major regional center for the treatment of heart disease including angioplasty and open-heart surgery. Through the Cancer Care Center of Southern West Virginia, Charleston Area Medical Center offers the most advanced treatment available to cancer patients. Through the Women and Childrens' Hospital, the Charleston Area Medical Center offers the only facility dedicated to the complete health care needs of women and children in West Virginia.

Important Facts about our Medical Staff:

Active medical staff:	364
% of Active Staff who are Board Certified:	72%

Charleston Area Medical Center has a strong commitment to the provision of high quality care which is evidenced by our continued accreditation by the Joint Commission on Accreditation of Healthcare Organizations. Our own internal mechanism for quality of care review encompasses a wide range of parameters. The mortality calculation provided by HCFA is not by itself an indicator of the quality of care provided in a tertiary care institution such as the Charleston Area Medical Center. Because of our unique position in this area as a highly sophisticated medical center, many of the patients we serve come to us from other hospitals with advanced treatment needs. Many factors, in addition to mortality, must be reviewed to assess the quality of care given in this type of facility. Our own internal review mechanism provides for indepth review of various facets of the care provided to our patients so that we may continually improve and update our services.

CITY HOSPITAL

TAVERN AND DRY RUN ROAD
MARTINSBURG , WV 25401

Medicare Hospital Provider Number: 510008

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,143	16	10 - 15	1,205	15	10 - 15
Cancer	48	60	29 - 59	42	57	28 - 60
Cerebrovascular Accidents	50	40	15 - 43	56	25	18 - 42
Gastrointestinal Catastrophes	6	33	8 - 75	11	36	9 - 64
Infectious Disease	22	36	16 - 57	17	41	17 - 63
Metabolic/Electrolyte Disorders	14	36	6 - 58	22	27	7 - 48
Pulmonary Disease	62	21	15 - 38	48	25	12 - 39
Renal Failure	8	13	10 - 71	8	13	13 - 74
Severe Acute Heart Disease	50	38	24 - 52	74	45	25 - 49
Severe Chronic Heart Disease	51	27	12 - 37	59	32	12 - 37
Severe Trauma	2	0	1 - 92	2	0	1 - 90
Gastrointestinal Disease	74	4	0 - 18	96	4	0 - 17
Gynecologic Disease	12	0	0 -100	7	0	0 -100
Low-Risk Heart Disease	138	2	1 - 8	180	6	1 - 10
Musculoskeletal/Skin Conditions	86	5	0 - 18	72	0	1 - 8
Neuropsychiatric/Sensory Disease	53	2	0 - 21	74	1	0 - 22
Urologic Disease	63	6	0 - 69	59	3	0 - 19

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 192
Occupancy Rate (%): 55
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: 60
Percent of Physicians Who Are Board Certified Specialists: 68
Interns and Residents: 0
Registered Nurses: 118
Licensed Practical Nurses: 39

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: Yes

DAVIS MEMORIAL HOSPITAL

PO BOX 1484
ELKINS, WV 26241

Medicare Hospital Provider Number: 510030

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,397	12	9 - 14	1,387	10	9 - 14
Cancer	44	34	26 - 56	26	38	23 - 61
Cerebrovascular Accidents	39	33	15 - 45	49	27	16 - 42
Gastrointestinal Catastrophes	12	33	9 - 62	13	38	18 - 69
Infectious Disease	22	32	17 - 58	19	32	19 - 62
Metabolic/Electrolyte Disorders	8	38	11 - 72	10	40	10 - 67
Pulmonary Disease	72	38	18 - 42	68	29	13 - 37
Renal Failure	6	33	16 - 86	6	33	10 - 81
Severe Acute Heart Disease	56	39	25 - 52	67	36	29 - 53
Severe Chronic Heart Disease	82	27	13 - 33	80	24	16 - 36
Severe Trauma	1	0	0 - 98	3	0	3 - 80
Gastrointestinal Disease	121	1	2 - 7	119	2	1 - 8
Gynecologic Disease	10	10	0 -100	20	0	0 -100
Low-Risk Heart Disease	193	3	1 - 7	182	3	1 - 7
Musculoskeletal/Skin Conditions	106	0	1 - 6	108	1	0 - 8
Neuropsychiatric/Sensory Disease	18	0	0 - 92	26	12	0 - 92
Urologic Disease	120	2	0 - 12	114	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	131
Occupancy Rate (%):	63
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	39
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	0
Registered Nurses:	110
Licensed Practical Nurses:	34

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ELIZABETH COPLIN LEONARD MEMORIAL HO

78 WEST MAIN STREET
BUCKHANNON, WV 26201

Medicare Hospital Provider Number: 510011

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	50	8	7 - 24	74	9	7 - 22
Cancer	1	100	3 - 98	1	0	3 - 98
Cerebrovascular Accidents	3	33	4 - 86	2	100	3 - 88
Gastrointestinal Catastrophes	0	-	-	1	0	0 - 99
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	3	0	2 - 80	5	20	5 - 74
Pulmonary Disease	6	17	9 - 71	16	6	6 - 39
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	2	0	3 - 88	1	100	2 - 97
Severe Chronic Heart Disease	0	-	-	5	20	2 - 75
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	6	0	0 -100	4	0	0 - 99
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	9	0	0 - 95	11	9	0 - 97
Musculoskeletal/Skin Conditions	3	0	0 -100	10	0	0 -100
Neuropsychiatric/Sensory Disease	0	-	-	2	0	0 -100
Urologic Disease	1	0	0 -100	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 20
Occupancy Rate (%): 25
Ownership/Control: Private, Non-profit

STAFFING

Total Number of Physicians: (not available)
Percent of Physicians Who Are Board Certified Specialists: (not available)
Interns and Residents: (not available)
Registered Nurses: (not available)
Licensed Practical Nurses: (not available)

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: No
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

FAIRMONT GENERAL HOSPITAL

1325 LOCUST AVE
FAIRMONT , WV 26554

Medicare Hospital Provider Number: 510047

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,346	14	10 - 15	1,786	14	10 - 15
Cancer	36	58	27 - 61	34	41	25 - 59
Cerebrovascular Accidents	47	30	17 - 44	70	50	20 - 45
Gastrointestinal Catastrophes	14	21	14 - 60	21	38	15 - 58
Infectious Disease	11	18	13 - 61	25	32	18 - 56
Metabolic/Electrolyte Disorders	15	20	4 - 51	15	47	10 - 60
Pulmonary Disease	108	32	16 - 36	124	33	19 - 38
Renal Failure	4	100	12 - 80	9	78	18 - 80
Severe Acute Heart Disease	78	45	28 - 51	104	35	28 - 49
Severe Chronic Heart Disease	72	28	13 - 35	105	25	15 - 33
Severe Trauma	1	0	2 - 97	1	0	0 - 99
Gastrointestinal Disease	122	5	1 - 11	142	3	1 - 9
Gynecologic Disease	15	0	0 -100	22	0	0 -100
Low-Risk Heart Disease	140	4	1 - 9	186	4	1 - 8
Musculoskeletal/Skin Conditions	85	1	0 - 13	178	3	0 - 9
Neuropsychiatric/Sensory Disease	15	7	0 - 79	37	3	0 - 57
Urologic Disease	67	4	0 - 30	62	2	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 237
Occupancy Rate (%): 43
Ownership/Control: Private, Non-profit

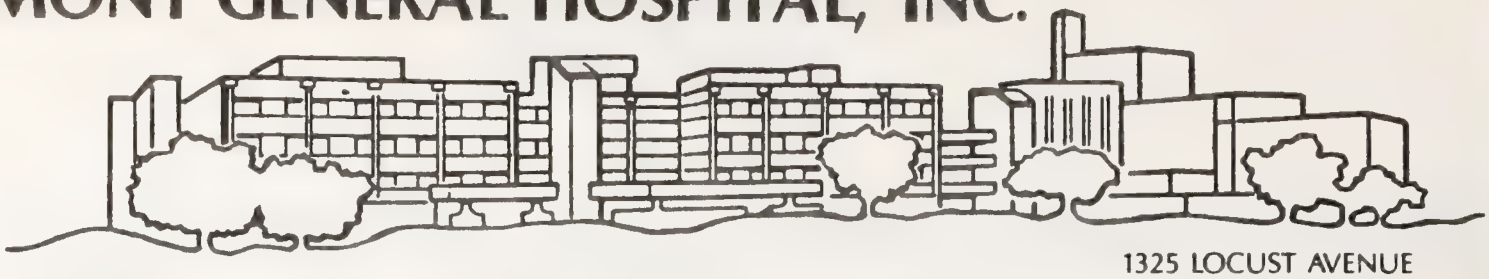
STAFFING

Total Number of Physicians: 76
Percent of Physicians Who Are Board Certified Specialists: 53
Interns and Residents: (not available)
Registered Nurses: (not available)
Licensed Practical Nurses: (not available)

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

FAIRMONT GENERAL HOSPITAL, INC.



1325 LOCUST AVENUE
FAIRMONT, WEST VIRGINIA 26554
304/367-7100
FAX 304/367-7169

510047

Mortality rate higher or lower than a predicted rate is not an indication of the quality of care provided at FGHI or any other institution. What is appreciated in the two years of information provided by HCFA is the continual stability of the results for this institution.

When both 1986 and 1987 mortality information is published, the public will compare area hospitals. This is very misleading when severity of illness factors were not taken into consideration when the data was compiled. Also not reflected in the data is the patient and family desires in regard to "comfort measures only" requests. FGHI and it's medical staff pride themselves in being cognizant of these factors.

FGHI has an excellent quality assurance system in place. All deaths, not only the Medicare population, are screened, and, if necessary, referred for formal medical review. To assure validity, the statistics compiled are based on clinical indicators from the patients' medical records and not from information taken from the billing form.

We trust HCFA's future endeavors will include such factors as severity of illness and patient/family desires. However, there remains limited ability to predict patient mortality.

GRAFTON CITY HOSP

RT 50 MARKET ST
GRAFTON, WV 26354

Medicare Hospital Provider Number: 510020

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	251	12	9 - 18	296	12	10 - 19
Cancer	5	40	10 - 81	11	82	24 - 71
Cerebrovascular Accidents	9	0	13 - 50	15	20	13 - 54
Gastrointestinal Catastrophes	6	50	9 - 77	3	0	8 - 81
Infectious Disease	2	0	5 - 89	4	50	3 - 82
Metabolic/Electrolyte Disorders	3	0	1 - 85	4	0	3 - 71
Pulmonary Disease	17	18	10 - 49	22	14	13 - 45
Renal Failure	2	50	4 - 93	5	80	16 - 88
Severe Acute Heart Disease	8	75	18 - 74	9	56	14 - 72
Severe Chronic Heart Disease	13	23	10 - 56	23	26	13 - 49
Severe Trauma	0	-	-	1	0	1 - 97
Gastrointestinal Disease	25	4	0 - 45	24	0	0 - 25
Gynecologic Disease	0	-	-	6	0	0 -100
Low-Risk Heart Disease	33	3	0 - 25	34	0	1 - 16
Musculoskeletal/Skin Conditions	21	5	0 - 67	32	0	0 - 21
Neuropsychiatric/Sensory Disease	5	0	0 -100	3	0	0 -100
Urologic Disease	12	0	0 -100	14	0	0 - 96

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 127
Occupancy Rate (%): 58
Ownership/Control: Local Government

STAFFING

Total Number of Physicians: 10
Percent of Physicians Who Are Board Certified Specialists: (not available)
Interns and Residents: 0
Registered Nurses: 18
Licensed Practical Nurses: 9

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

GRANT MEMORIAL HOSPITAL

PO BOX 1029
PETERSBURG, WV 26847

Medicare Hospital Provider Number: 510026

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	442	11	7 - 14	440	11	9 - 15
Cancer	6	83	25 - 86	5	20	13 - 80
Cerebrovascular Accidents	14	43	11 - 60	13	23	11 - 57
Gastrointestinal Catastrophes	3	67	8 - 89	2	50	5 - 93
Infectious Disease	2	0	1 - 89	5	60	9 - 80
Metabolic/Electrolyte Disorders	9	0	5 - 47	6	50	11 - 78
Pulmonary Disease	23	39	9 - 49	35	23	12 - 42
Renal Failure	1	100	3 - 98	4	50	11 - 89
Severe Acute Heart Disease	9	56	20 - 77	17	35	21 - 65
Severe Chronic Heart Disease	20	15	9 - 43	20	25	10 - 49
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	37	0	0 - 17	33	0	0 - 32
Gynecologic Disease	12	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	77	8	1 - 17	66	2	0 - 13
Musculoskeletal/Skin Conditions	45	2	0 - 24	39	5	0 - 83
Neuropsychiatric/Sensory Disease	13	0	0 -100	10	0	0 -100
Urologic Disease	5	0	0 -100	7	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 59
Occupancy Rate (%): 68
Ownership/Control: Local Government

STAFFING

Total Number of Physicians: 9
Percent of Physicians Who Are Board Certified Specialists: 67
Interns and Residents: (not available)
Registered Nurses: (not available)
Licensed Practical Nurses: (not available)

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

GUTHRIE MEM HOSP INC

547 6TH AV
HUNTINGTON, WV 25701

Medicare Hospital Provider Number: 510019

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	72	10	3 - 19	83	8	6 - 19
Cancer	4	75	10 - 83	1	100	2 - 97
Cerebrovascular Accidents	2	50	1 - 93	3	33	2 - 87
Gastrointestinal Catastrophes	1	0	0 - 98	0	-	-
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	1	0	0 -100	0	-	-
Pulmonary Disease	5	40	1 - 80	12	8	9 - 49
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	1	0	2 - 97	4	25	6 - 80
Severe Chronic Heart Disease	1	100	0 -100	7	14	4 - 63
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	14	0	0 - 99	11	0	0 - 99
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	7	0	0 -100	5	0	0 -100
Musculoskeletal/Skin Conditions	8	0	0 -100	5	0	0 -100
Neuropsychiatric/Sensory Disease	2	0	0 -100	2	0	0 - 99
Urologic Disease	3	0	0 -100	6	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	32
Occupancy Rate (%):	13
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	6
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HAMPSHIRE MEMORIAL HOSP

PO BOX 555
ROMNEY, WV 26757

Medicare Hospital Provider Number: 510036

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	144	17	9 - 22	179	13	8 - 19
Cancer	0	-	-	1	100	3 - 98
Cerebrovascular Accidents	3	0	3 - 79	4	50	4 - 82
Gastrointestinal Catastrophes	1	0	0 - 97	3	67	3 - 86
Infectious Disease	3	0	2 - 80	2	0	3 - 88
Metabolic/Electrolyte Disorders	3	33	1 - 88	4	25	1 - 83
Pulmonary Disease	21	24	11 - 49	26	27	12 - 47
Renal Failure	2	50	2 - 93	0	-	-
Severe Acute Heart Disease	17	53	18 - 63	11	18	19 - 66
Severe Chronic Heart Disease	12	0	9 - 39	12	17	5 - 52
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	8	0	0 - 92	10	0	0 - 99
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	24	4	0 - 68	34	0	0 - 18
Musculoskeletal/Skin Conditions	4	25	0 -100	12	8	0 -100
Neuropsychiatric/Sensory Disease	2	0	0 -100	3	0	0 -100
Urologic Disease	5	20	0 -100	3	0	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 29
Occupancy Rate (%): 52
Ownership/Control: Private, For Profit

STAFFING

Total Number of Physicians: 7
Percent of Physicians Who Are Board Certified Specialists: 43
Interns and Residents: 0
Registered Nurses: 14
Licensed Practical Nurses: 1

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

HCA RIVER PARK HOSPITAL

1230 6TH AVE
HUNTINGTON, WV 25701

Medicare Hospital Provider Number: 510014

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	373	12	7 - 15	459	10	7 - 14
Cancer	3	33	5 - 86	8	75	13 - 70
Cerebrovascular Accidents	16	25	13 - 56	8	25	6 - 65
Gastrointestinal Catastrophes	2	50	3 - 92	2	0	3 - 88
Infectious Disease	5	100	8 - 66	6	83	13 - 74
Metabolic/Electrolyte Disorders	5	0	2 - 66	6	17	1 - 73
Pulmonary Disease	29	21	9 - 41	35	11	10 - 35
Renal Failure	2	50	0 - 96	5	40	9 - 84
Severe Acute Heart Disease	24	25	20 - 55	18	28	15 - 56
Severe Chronic Heart Disease	14	14	6 - 47	29	14	10 - 37
Severe Trauma	0	-	-	1	0	0 - 99
Gastrointestinal Disease	20	0	0 - 35	29	7	0 - 70
Gynecologic Disease	0	-	-	2	0	0 -100
Low-Risk Heart Disease	69	6	1 - 18	71	1	1 - 11
Musculoskeletal/Skin Conditions	43	5	0 - 78	57	0	0 - 17
Neuropsychiatric/Sensory Disease	8	0	0 -100	15	7	0 - 97
Urologic Disease	11	0	0 -100	13	0	0 - 49

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	80
Occupancy Rate (%):	44
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	65
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	53
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HERBERT J THOMAS MEM HOSP

4605 MACCORKLE AVE SW
SOUTH CHARLESTON, WV 25309

Medicare Hospital Provider Number: 510029

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,199	12	9 - 13	2,335	12	10 - 14
Cancer	79	35	25 - 50	84	50	29 - 54
Cerebrovascular Accidents	64	23	16 - 38	71	31	20 - 42
Gastrointestinal Catastrophes	20	30	13 - 56	20	35	18 - 61
Infectious Disease	23	43	17 - 59	22	36	17 - 59
Metabolic/Electrolyte Disorders	31	39	9 - 47	32	38	12 - 49
Pulmonary Disease	139	23	16 - 34	138	30	17 - 36
Renal Failure	11	55	14 - 76	11	73	20 - 81
Severe Acute Heart Disease	82	45	26 - 49	83	37	27 - 49
Severe Chronic Heart Disease	116	24	13 - 30	125	22	15 - 32
Severe Trauma	1	100	0 - 99	0	-	-
Gastrointestinal Disease	171	2	1 - 7	222	3	1 - 7
Gynecologic Disease	32	0	0 -100	31	3	0 -100
Low-Risk Heart Disease	314	5	1 - 7	277	4	1 - 7
Musculoskeletal/Skin Conditions	145	1	1 - 7	138	3	0 - 11
Neuropsychiatric/Sensory Disease	72	1	0 - 16	124	0	1 - 6
Urologic Disease	118	1	0 - 8	100	1	0 - 11

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	225
Occupancy Rate (%):	64
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	98
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	0
Registered Nurses:	140
Licensed Practical Nurses:	82

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

Gary L. Park
President and Chief Executive Officer

Thomas Memorial Hospital
4605 MacCorkle Avenue, S.W.
South Charleston, West Virginia 25309
304-766-3523

October 17, 1988

William R. Roper, M.D.
Administrator
Health Care Financing Administration
Department of Health and Human Services
Washington, D.C. 20201

Re: Hospital I.D. 510029

Dear Doctor Roper:

Your letter regarding Thomas Memorial Hospital's 1987 mortality data, as prepared by the Health Care Financing Administration, has been received. Those Medicare patients identified by HCFA who were admitted and died in our hospital during 1987 appears to be essentially correct. Due to the time constraints, we have again been unable to confirm the accuracy of all the data, especially those deaths occurring within 30 days of discharge from our institution, and which occurred in other settings (i.e. home, nursing home, personal care homes).

Our overall actual mortality rate of 12%, compared with your predicted range of 9-15%, is exactly that which you recorded in 1987 for the 1986 data. The actual mortality rate in the sixteen diagnostic categories also falls very closely to the range recorded in your 1987 report. If one lends credence to your methodology then this would certainly suggest that management of these sixteen categories in this hospital is at the very least consistent and acceptable. The mission of this hospital remains to provide quality service to those who present themselves to our care. While acceptable levels of quality care are evident in your report by your standards, we nevertheless are constantly striving to improve the quality of care as evaluated by our standards.

We continue to have reservations about any attempts to measure quality of care by raw mortality statistics. Severity of illness, socioeconomic and genetic background must be considered. We wish to restate our concern regarding the wisdom of presenting such information publicly when it may well be premature and misleading. Under such circumstances, is it necessary to raise anxiety levels and perhaps create undeserved erosion of confidence in healing institutions under such circumstances?

Your information regarding characteristics of Thomas Memorial Hospital are in error in four respects:

1) We do not provide trauma and burn unit services as indicated.
2) We do provide Coronary Care Unit, this was indicated to the contrary.
3) We do not provide organ transplant service as indicated in the report.
4) We do provide Hospice care by contract arrangement.

William R. Roper, M.D.
October 17, 1988
Page 2

Our staffing characteristics have also changed to the extent that we now have 0.68 R.N.'s per bed and 0.37 L.P.N.'s per bed as opposed to the figures given in the AHA 1986 survey. The hospital characteristics are to be published in December 1988 along with the mortality information. We would appreciate having these corrections made.

Steadfast in our commitment to quality health care in our institution, we remain

Sincerely yours,

Gary L. Park
President

George W. Hogshead, M.D.
Medical Director

GLP:GWH/bh

HOLDEN HOSPITAL

BOX K
HOLDEN , WV 25625

Medicare Hospital Provider Number: 510045

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	30	3	5 - 23	82	13	10 - 26
Cancer	0	-	-	2	100	12 - 98
Cerebrovascular Accidents	0	-	-	2	0	2 - 89
Gastrointestinal Catastrophes	2	0	9 - 93	1	0	3 - 98
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	2	50	1 - 94
Pulmonary Disease	2	0	7 - 90	20	25	15 - 54
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	1	100	1 - 97	2	0	3 - 88
Severe Chronic Heart Disease	2	0	0 - 94	6	17	3 - 69
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	2	0	0 -100	4	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	12	0	0 - 98	25	4	0 - 60
Musculoskeletal/Skin Conditions	0	-	-	4	0	0 -100
Neuropsychiatric/Sensory Disease	2	0	0 -100	0	-	-
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	36
Occupancy Rate (%):	19
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	18
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	7
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

HUMANA HOSP GREENBRIER VALLEY

P O BOX 497
RONCEVERTE, WV 24970

Medicare Hospital Provider Number: 510002

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,038	11	11 - 16	1,078	15	10 - 16
Cancer	25	64	25 - 63	24	63	25 - 64
Cerebrovascular Accidents	67	22	16 - 38	68	31	17 - 41
Gastrointestinal Catastrophes	6	33	13 - 79	13	31	16 - 66
Infectious Disease	6	17	8 - 70	3	33	4 - 86
Metabolic/Electrolyte Disorders	10	20	11 - 63	13	31	9 - 60
Pulmonary Disease	97	24	17 - 37	89	22	17 - 37
Renal Failure	1	100	3 - 99	2	50	2 - 93
Severe Acute Heart Disease	66	32	28 - 52	57	35	23 - 50
Severe Chronic Heart Disease	42	33	11 - 41	48	27	14 - 41
Severe Trauma	3	0	4 - 79	0	-	-
Gastrointestinal Disease	90	1	1 - 9	69	0	1 - 8
Gynecologic Disease	6	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	110	2	2 - 8	159	5	1 - 10
Musculoskeletal/Skin Conditions	92	2	1 - 10	88	5	0 - 16
Neuropsychiatric/Sensory Disease	7	0	0 -100	11	0	0 - 92
Urologic Disease	95	0	0 - 8	74	1	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	122
Ownership/Control:	Private, For Profit

STAFFING

Interns and Residents:	0
Registered Nurses:	42
Licensed Practical Nurses:	40

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

P.O. Box 497
Ronceverte, West Virginia
24970-0497
Telephone 304 647-4411

Medicare Provider # 510002

**Humana Hospital
Greenbrier Valley**

October 21, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Blvd.
Baltimore, Maryland 21207

Dear Mrs. Kappert:

I appreciate the opportunity to comment on the Medicare patient mortality data and the hospital profile characteristics to be published by the Health Care Financing Administration. The information does serve as a part of this hospital's and the health care industry's ongoing quality assurance programs.

HCFA's efforts to provide our hospital specifically, and the health care industry in general, with quality assurance information should be commended.

I also appreciate your public position that even though attempts have been made to further refine the manipulation of the date, this information is limited and cannot be used as a complete measure of quality.

I am very proud of our quality assurance program that is in place at Humana Hospital Greenbrier Valley; it is well-established and includes routine review by the Joint Commission on Accreditation of Healthcare Organizations and other outside review agencies, ongoing utilization review, quality assurance, in-hospital morbidity and mortality reviews and analyses of all inpatient mortality.

The raw numbers that you have provided in this release further assist us in confirming our records and in analyzing Medicare patient mortality.

The medical records department and quality assurance staff have reviewed the statistics provided by HCFA. Since some of the deaths attributed to patients in our hospital occurred after discharge, we have been unable to completely validate the data. By catagory, the number of patients in many cases is too limited to provide a valid statistical analysis. Additionally, predicated ranges have been developed in such a complex and unverifiable way, it would be useless to consider them "standard" ranges.

I also am concerned that the information listed under "Hospital Characteristics" contained inaccurate figures inconsistent with our hospital records, thus we are unable to confirm any of that data.

Specifically, all catagories listed were reviewed and we have determined that under the diagnostic catagories of cancer and renal failure the following additional information proves very enlightening. For cancer, the average patient age was 76, and of the 16 deaths, 12 patients had recieved previous treatment when the cancer was first diagnosed. These patients were admitted to Humana Hospital Greenbrier Valley for complications associated with cancer in the final stages; the cancer spread to other parts of the body. A final noteworthy point, a large number of the above mentioned patients had, by family consent, the Do Not Resusciate Policy in place.

In regards to the one Renal Failure death, this 89 year old diabetic patient with multiple complications such as a bilateral amputation, a history of strokes, and congestive heart failure, had mulitple admissions throughout the year prior to his last admission for Diabetic Renal complication.

We stand ready to aid our community in reviewing this very complex data explaining how this type of information is used to affirm and improve the quality of heath care services.

Sincerely,

Greg L. Gibson, Executive Director,
Humana Hospital Greenbrier Valley

GLG/nlr

HUMANA HOSP-ST LUKE'S BLUEFIELD

1333 SOUTHVIEW DRIVE
BLUEFIELD , WV 24701

Medicare Hospital Provider Number: 510067

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	495	10	8 - 14	542	12	9 - 15
Cancer	9	33	16 - 73	16	44	19 - 66
Cerebrovascular Accidents	15	27	8 - 53	14	14	8 - 49
Gastrointestinal Catastrophes	9	22	16 - 71	4	0	10 - 74
Infectious Disease	4	25	9 - 82	4	25	5 - 80
Metabolic/Electrolyte Disorders	5	40	2 - 79	6	67	6 - 74
Pulmonary Disease	24	13	10 - 41	37	24	14 - 44
Renal Failure	6	17	5 - 74	9	33	11 - 76
Severe Acute Heart Disease	11	64	17 - 70	18	33	21 - 63
Severe Chronic Heart Disease	18	39	5 - 51	35	29	10 - 41
Severe Trauma	3	33	7 - 88	0	-	-
Gastrointestinal Disease	35	0	0 - 17	48	4	0 - 24
Gynecologic Disease	1	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	65	3	1 - 14	50	0	2 - 10
Musculoskeletal/Skin Conditions	69	0	0 - 10	88	2	0 - 24
Neuropsychiatric/Sensory Disease	20	5	0 - 98	11	0	0 - 95
Urologic Disease	15	7	0 - 87	14	0	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	79
Occupancy Rate (%):	51
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	33
Percent of Physicians Who Are Board Certified Specialists:	64
Interns and Residents:	0
Registered Nurses:	45
Licensed Practical Nurses:	19

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	Yes
Hospice Care:	No

Humana Hospital
St. Luke's

October 20, 1988

Mrs. Sandra Kappert
Health Standards and Quality Bureau, HCFA
2-D-2 Meadows East Building
6325 Security Blvd.
Baltimore, MD 21207

Dear Mrs. Kappert:

I appreciate the opportunity to comment on the Medicare patient mortality data and the hospital profile characteristics to be published by the Health Care Financing Administration. The information does serve as a part of this hospital's and the health care industry's ongoing quality assurance programs.

HCFA's efforts to provide our hospital specifically, and the health care industry in general, with quality assurance information should be commended.

I also appreciate your public position that even though attempts have been made to further refine the manipulation of the data, this information is limited and cannot be used as a complete measure of quality.

I am very proud of our quality assurance program that is in place at Humana Hospital - St. Luke's; it is well-established and includes routine review by the Joint Commission on Accreditation of Healthcare Organizations and other outside review agencies, ongoing utilization review, quality assurance, in-hospital morbidity and mortality reviews and analyses of all inpatient mortality.

The raw numbers that you have provided in this release further assist us in confirming our records and in analyzing Medicare patient mortality.

The (Medical Records Dept. & Medical Staff) have reviewed the statistics provided by HCFA. Since some of the deaths attributed to patients in our hospital occurred after discharge, we have been unable to completely validate the data. By category, the number of patients in many cases is too limited to provide a valid statistical analysis. Additionally, predicted ranges have been developed in such a complex and unverifiable way, it would be useless to consider them "standard" ranges.

I also am concerned that the information listed under "Hospital Characteristics" contains inaccurate figures inconsistent with our hospital records, thus we are unable to confirm any of that data.

We stand ready to aid our community in reviewing this very complex data and explaining how this type of information is used to affirm and improve the quality of health care services.

Sincerely,

Austin D. Edwards, Executive Director
Humana Hospital - St. Luke's

ADE/df

JACKSON GENERAL HOSP

PINNELL ST
RIPLEY, WV 25271

Medicare Hospital Provider Number: 510018

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	434	16	10 - 17	469	13	11 - 18
Cancer	12	67	20 - 71	14	57	23 - 72
Cerebrovascular Accidents	23	26	13 - 49	23	26	17 - 53
Gastrointestinal Catastrophes	2	0	1 - 90	6	33	12 - 78
Infectious Disease	5	60	8 - 79	4	50	8 - 84
Metabolic/Electrolyte Disorders	6	17	8 - 70	5	0	4 - 64
Pulmonary Disease	40	35	11 - 42	28	32	18 - 53
Renal Failure	1	0	2 - 98	5	40	16 - 90
Severe Acute Heart Disease	23	39	22 - 61	22	41	23 - 63
Severe Chronic Heart Disease	19	26	7 - 48	32	44	13 - 47
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	30	3	0 - 77	38	0	0 - 17
Gynecologic Disease	7	0	0 -100	6	17	0 -100
Low-Risk Heart Disease	53	4	1 - 19	52	2	1 - 14
Musculoskeletal/Skin Conditions	31	3	0 - 66	36	0	0 - 32
Neuropsychiatric/Sensory Disease	21	0	0 - 77	18	0	0 - 73
Urologic Disease	15	7	0 -100	28	0	0 - 78

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	95
Occupancy Rate (%):	34
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	12
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	32
Licensed Practical Nurses:	15

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

JEFFERSON MEMORIAL HOSPITAL

300 S PRESTON ST
RANSON , WV 25438

Medicare Hospital Provider Number: 510068

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	446	13	10 - 17	508	15	10 - 17
Cancer	8	75	12 - 69	16	44	20 - 67
Cerebrovascular Accidents	11	55	10 - 64	24	46	14 - 53
Gastrointestinal Catastrophes	10	20	13 - 65	8	38	13 - 74
Infectious Disease	12	8	12 - 53	1	0	0 - 98
Metabolic/Electrolyte Disorders	5	40	4 - 78	6	17	2 - 70
Pulmonary Disease	45	29	14 - 42	39	31	13 - 43
Renal Failure	0	-	-	2	0	5 - 90
Severe Acute Heart Disease	29	34	22 - 57	30	50	20 - 56
Severe Chronic Heart Disease	29	14	11 - 38	27	30	13 - 48
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	35	0	0 - 25	44	0	0 - 15
Gynecologic Disease	3	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	50	0	2 - 10	62	2	1 - 12
Musculoskeletal/Skin Conditions	33	6	0 - 52	29	0	0 - 34
Neuropsychiatric/Sensory Disease	7	14	0 - 99	16	0	0 - 88
Urologic Disease	18	0	0 -100	18	6	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	56
Occupancy Rate (%):	49
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	24
Percent of Physicians Who Are Board Certified Specialists:	58
Interns and Residents:	0
Registered Nurses:	36
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

LOGAN GENERAL HOSP

20 HOSPITAL DRIVE
LOGAN, WV 25601

Medicare Hospital Provider Number: 510048

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,220	13	11 - 16	1,218	15	12 - 17
Cancer	25	68	32 - 70	31	77	37 - 69
Cerebrovascular Accidents	38	18	16 - 42	45	29	17 - 45
Gastrointestinal Catastrophes	9	44	10 - 70	16	50	20 - 68
Infectious Disease	20	50	22 - 65	17	59	18 - 64
Metabolic/Electrolyte Disorders	10	40	13 - 69	13	38	13 - 64
Pulmonary Disease	128	25	20 - 39	124	23	20 - 38
Renal Failure	3	33	10 - 93	2	0	9 - 94
Severe Acute Heart Disease	47	47	25 - 55	62	47	24 - 50
Severe Chronic Heart Disease	50	18	13 - 36	67	22	16 - 37
Severe Trauma	1	0	2 - 97	4	50	2 - 83
Gastrointestinal Disease	76	4	1 - 14	81	1	0 - 11
Gynecologic Disease	8	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	238	3	2 - 7	236	4	1 - 7
Musculoskeletal/Skin Conditions	68	0	1 - 9	71	1	0 - 13
Neuropsychiatric/Sensory Disease	13	0	0 - 97	9	11	0 -100
Urologic Disease	73	0	0 - 9	71	3	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	123
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	61
Percent of Physicians Who Are Board Certified Specialists:	36
Interns and Residents:	0
Registered Nurses:	106
Licensed Practical Nurses:	22

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

LOGAN GENERAL HOSPITAL
20 Hospital Drive
Logan, West Virginia 25601

Mark S. Spurlock, M.D.
Co-ordinator of Medical Staff Affairs

(304) 792-1171

September 26, 1988

Health Standards & Quality Bureau, HCFA
Attn: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Re: Medicare Provider #510048

Dear Mrs. Kappert:

The Logan General Hospital has received the information sheet about Medicare experience. I have reviewed the information. The 1986 and 1987 mortality tables are in accord with my information and I have no comment on them.

There are, however, serious errors in the Hospital characteristics section. Although I realize you may be using AHA 1987 information, I am providing the correct information as follows:

Beds (#)	109
Occupancy Rate (%)	78.0%
Ownership/Control:	Private, non-profit

Staffing:

Total # of Physicians:	65
Percent of Physicians who are Board Certified Specialists:	34%
Interns & Residents per bed:	0.064
Registered Nurses per bed:	1.12
Licensed Practical Nurses per bed:	0.56

Specialty Services:

Shock/Trauma or Burn Unit:	Yes
Coronary Care Unit:	Yes
Organ Transplant Service:	No
Hospice Care:	No

I would very much appreciate it if you could have these corrections made. If any other information is required please contact me. Thank you.

Very truly yours,

Mark S Spurlock MD

Mark S. Spurlock, M. D.
Coordinator of Medical Staff Affairs

MAN APPALACHIAN REGIONAL HOSP

600-800 E MCDONALD AVE
MAN, WV 25635

Medicare Hospital Provider Number: 510035

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	299	10	8 - 15	174	8	7 - 16
Cancer	5	80	11 - 78	2	50	3 - 92
Cerebrovascular Accidents	12	42	11 - 63	12	42	12 - 64
Gastrointestinal Catastrophes	0	-	-	1	0	1 - 97
Infectious Disease	5	0	10 - 67	1	0	2 - 97
Metabolic/Electrolyte Disorders	2	0	0 - 99	1	0	0 -100
Pulmonary Disease	23	35	13 - 52	21	10	9 - 39
Renal Failure	1	0	0 - 99	0	-	-
Severe Acute Heart Disease	14	14	21 - 60	8	25	9 - 67
Severe Chronic Heart Disease	9	22	6 - 61	9	11	4 - 55
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	18	0	0 - 91	16	6	0 - 86
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	90	2	1 - 11	34	0	0 - 20
Musculoskeletal/Skin Conditions	15	0	0 -100	10	0	0 -100
Neuropsychiatric/Sensory Disease	1	0	0 -100	1	0	0 -100
Urologic Disease	8	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	82
Occupancy Rate (%):	27
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	22
Percent of Physicians Who Are Board Certified Specialists:	68
Interns and Residents:	0
Registered Nurses:	28
Licensed Practical Nurses:	14

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MONONGALIA CO GENERAL HOSP CO

1200 JD ANDERSON DR
MORGANTOWN, WV 26505

Medicare Hospital Provider Number: 510024

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,571	10	10 - 14	2,224	12	10 - 14
Cancer	100	47	28 - 52	75	36	28 - 54
Cerebrovascular Accidents	86	22	18 - 38	76	33	19 - 41
Gastrointestinal Catastrophes	10	30	12 - 67	18	28	16 - 59
Infectious Disease	31	52	21 - 58	34	47	25 - 61
Metabolic/Electrolyte Disorders	35	46	17 - 53	32	47	15 - 52
Pulmonary Disease	129	25	18 - 36	129	28	18 - 36
Renal Failure	7	43	14 - 83	7	57	11 - 81
Severe Acute Heart Disease	93	40	26 - 48	89	44	28 - 51
Severe Chronic Heart Disease	137	17	17 - 32	107	23	17 - 34
Severe Trauma	2	0	1 - 92	1	0	0 - 99
Gastrointestinal Disease	194	1	1 - 5	164	4	1 - 9
Gynecologic Disease	27	4	0 -100	32	0	0 -100
Low-Risk Heart Disease	323	3	2 - 6	290	3	2 - 7
Musculoskeletal/Skin Conditions	293	1	1 - 4	263	2	1 - 6
Neuropsychiatric/Sensory Disease	84	2	0 - 12	81	1	0 - 11
Urologic Disease	96	1	0 - 12	70	0	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	220
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	92
Percent of Physicians Who Are Board Certified Specialists:	73
Interns and Residents:	0
Registered Nurses:	156
Licensed Practical Nurses:	65

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MONTGOMERY GENL HOSP

WASHINGTON STSIXTH AVE
MONTGOMERY, WV 25136

Medicare Hospital Provider Number: 510028

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	619	12	8 - 14	742	13	10 - 16
Cancer	8	63	17 - 77	15	47	29 - 77
Cerebrovascular Accidents	11	36	7 - 61	27	26	12 - 46
Gastrointestinal Catastrophes	5	60	5 - 78	6	33	5 - 73
Infectious Disease	2	50	8 - 97	5	60	8 - 79
Metabolic/Electrolyte Disorders	8	13	4 - 60	6	50	5 - 75
Pulmonary Disease	57	25	15 - 40	79	20	15 - 36
Renal Failure	1	0	3 - 98	4	25	13 - 89
Severe Acute Heart Disease	32	25	20 - 51	36	50	23 - 56
Severe Chronic Heart Disease	23	39	11 - 50	36	14	13 - 38
Severe Trauma	1	0	1 - 97	0	-	-
Gastrointestinal Disease	43	5	0 - 37	58	0	1 - 9
Gynecologic Disease	6	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	115	2	1 - 8	128	2	2 - 8
Musculoskeletal/Skin Conditions	56	4	0 - 43	63	3	0 - 24
Neuropsychiatric/Sensory Disease	16	6	0 -100	11	0	0 - 89
Urologic Disease	34	6	0 - 88	39	0	0 - 17

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	88
Occupancy Rate (%):	49
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	26
Percent of Physicians Who Are Board Certified Specialists:	27
Interns and Residents:	0
Registered Nurses:	59
Licensed Practical Nurses:	26

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MORGAN CO WAR MEM HOSP

1090 FAIRFAX ST
BERKELEY SPRINGS, WV 25411

Medicare Hospital Provider Number: 510027

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	169	12	8 - 19	206	21	10 - 22
Cancer	2	100	7 - 90	5	60	13 - 84
Cerebrovascular Accidents	5	0	11 - 67	5	40	8 - 79
Gastrointestinal Catastrophes	1	100	1 - 97	2	50	4 - 93
Infectious Disease	1	100	1 - 97	1	100	3 - 98
Metabolic/Electrolyte Disorders	6	0	5 - 59	12	25	9 - 60
Pulmonary Disease	20	20	11 - 48	21	33	7 - 49
Renal Failure	0	-	-	4	100	18 - 86
Severe Acute Heart Disease	5	20	12 - 79	8	63	16 - 75
Severe Chronic Heart Disease	11	9	7 - 50	16	38	9 - 55
Severe Trauma	1	100	1 - 97	0	-	-
Gastrointestinal Disease	17	0	0 - 90	13	0	0 - 90
Gynecologic Disease	1	0	0 -100	2	0	0 -100
Low-Risk Heart Disease	25	8	0 - 42	31	3	1 - 24
Musculoskeletal/Skin Conditions	7	0	0 -100	13	8	0 -100
Neuropsychiatric/Sensory Disease	2	50	0 -100	3	0	0 -100
Urologic Disease	10	0	0 -100	13	8	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	43
Occupancy Rate (%):	77
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	13
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

OHIO VALLEY GENERAL HOSPITAL

2000 EOFF STREET
WHEELING , WV 26003

Medicare Hospital Provider Number: 510039

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,050	10	9 - 13	2,152	12	9 - 14
Cancer	83	39	29 - 53	79	38	33 - 59
Cerebrovascular Accidents	76	24	15 - 35	78	31	18 - 40
Gastrointestinal Catastrophes	16	56	17 - 65	10	30	11 - 66
Infectious Disease	22	27	14 - 53	31	42	18 - 55
Metabolic/Electrolyte Disorders	27	15	8 - 42	19	21	17 - 57
Pulmonary Disease	86	19	16 - 35	109	23	16 - 35
Renal Failure	9	33	13 - 77	5	80	10 - 81
Severe Acute Heart Disease	83	34	25 - 48	91	42	28 - 50
Severe Chronic Heart Disease	93	25	14 - 33	90	34	15 - 36
Severe Trauma	7	14	5 - 65	5	0	5 - 65
Gastrointestinal Disease	128	2	0 - 9	122	2	1 - 8
Gynecologic Disease	17	0	0 -100	16	0	0 -100
Low-Risk Heart Disease	232	2	1 - 6	245	4	1 - 7
Musculoskeletal/Skin Conditions	212	3	1 - 7	220	1	1 - 6
Neuropsychiatric/Sensory Disease	216	1	0 - 6	226	1	0 - 6
Urologic Disease	72	4	0 - 44	82	2	0 - 23

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	629
Occupancy Rate (%):	57
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	158
Percent of Physicians Who Are Board Certified Specialists:	70
Interns and Residents:	43
Registered Nurses:	274
Licensed Practical Nurses:	26

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

PLATEAU MEDICAL CENTER

430 MAIN STREET
OAK HILL, WV 25901

Medicare Hospital Provider Number: 510060

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	701	18	10 - 16	639	18	9 - 16
Cancer	12	58	21 - 73	21	67	25 - 65
Cerebrovascular Accidents	35	37	14 - 46	29	34	15 - 50
Gastrointestinal Catastrophes	6	17	9 - 71	7	86	9 - 67
Infectious Disease	3	67	6 - 87	6	50	13 - 80
Metabolic/Electrolyte Disorders	3	33	0 - 93	5	60	10 - 81
Pulmonary Disease	82	29	14 - 36	56	32	14 - 41
Renal Failure	6	83	13 - 79	2	0	4 - 90
Severe Acute Heart Disease	30	50	25 - 61	24	58	19 - 58
Severe Chronic Heart Disease	38	34	13 - 43	26	31	7 - 44
Severe Trauma	2	0	3 - 88	1	0	1 - 97
Gastrointestinal Disease	73	8	0 - 29	51	6	0 - 28
Gynecologic Disease	15	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	126	6	1 - 12	122	2	1 - 8
Musculoskeletal/Skin Conditions	25	4	0 - 73	38	3	0 - 57
Neuropsychiatric/Sensory Disease	6	0	0 -100	13	8	0 -100
Urologic Disease	38	3	0 - 69	31	0	0 - 38

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1988

Total Beds (#):	91
Ownership/Control:	Private, For Profit

STAFFING

Interns and Residents:	0
Registered Nurses:	48
Licensed Practical Nurses:	25

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

PLEASANT VALLEY HOSPITAL

VALLEY DRIVE
POINT PLEASANT , WV 25550

Medicare Hospital Provider Number: 510012

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	724	15	10 - 16	764	15	10 - 16
Cancer	20	50	28 - 70	19	68	30 - 72
Cerebrovascular Accidents	22	41	13 - 53	26	54	15 - 53
Gastrointestinal Catastrophes	2	0	5 - 89	6	67	14 - 80
Infectious Disease	17	35	19 - 64	13	23	16 - 63
Metabolic/Electrolyte Disorders	6	17	5 - 69	9	33	4 - 65
Pulmonary Disease	58	31	16 - 42	64	28	15 - 39
Renal Failure	4	50	12 - 90	3	67	7 - 89
Severe Acute Heart Disease	25	56	23 - 61	28	50	21 - 57
Severe Chronic Heart Disease	49	43	14 - 42	41	44	12 - 43
Severe Trauma	1	100	2 - 97	0	-	-
Gastrointestinal Disease	50	0	0 - 13	60	0	1 - 9
Gynecologic Disease	3	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	146	5	1 - 10	150	1	2 - 7
Musculoskeletal/Skin Conditions	33	3	0 - 75	38	8	0 - 74
Neuropsychiatric/Sensory Disease	15	0	0 - 66	15	0	0 - 95
Urologic Disease	56	7	0 - 29	58	3	0 - 20

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	228
Occupancy Rate (%):	65
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	22
Percent of Physicians Who Are Board Certified Specialists:	55
Interns and Residents:	0
Registered Nurses:	82
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PVH
PLEASANT VALLEY HOSPITAL

Dennis L. Carder
Assistant Executive Director

Telephone
(304) 675-4340

002

October 14, 1988

RE: Med. Provider #: 51-0012

Health Standards and Quality Bureau, HCFA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, MD 21207

Dear Mrs. Kappert:

Upon receipt of your mortality information for the year 1987, a record review was performed on the two (2) categories in which Pleasant Valley Hospital exceeded the range of predicted mortality rates. The outcome of the review indicates a discrepancy in the number of cases utilized in one of the diagnostic categories. For our specific institution we have utilized the DRG validation sheet as submitted to our Medicare PRO within the state of West Virginia as the basis for the number of cases and the number of deaths for each diagnostic category.

Diagnostic Category: Severe Chronic Heart Disease

	# of Cases	# of Deaths	% of Mortality
HCFA	49	21	42.8%
PVH	122	21	17.2%

The other diagnostic category in which our facility exceeded the range for predicted mortality was severe trauma.

Diagnostic Category: Severe Trauma

	# of Cases	# of Deaths	% of Mortality
HCFA	1	1	100%
PVH	1	1	100%

As noted, only one (1) patient was identified in this particular category and the ultimate outcome was death. Identifying the cause of an isolated outcome--either desirable or unwanted--is difficult when only a limited number of patients can be reviewed. All deaths within our institution are reviewed by a medical staff committee with criteria addressing the process of care and ultimate outcome. Our final computation reveals no unusual patterns regarding patient care.

Thank you for the opportunity to review the information prior to publication.

Sincerely,

Dennis L. Carder

Dennis L. Carder
Assistant Executive Director

MGS:dai

POCAHONTAS MEM HOSP

103 8TH ST
MARLINTON, WV 24954

Medicare Hospital Provider Number: 510043

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	195	16	14 - 25	218	17	14 - 24
Cancer	3	33	13 - 94	1	100	0 - 99
Cerebrovascular Accidents	7	14	9 - 65	10	50	7 - 64
Gastrointestinal Catastrophes	1	0	3 - 99	2	0	6 - 90
Infectious Disease	7	29	14 - 75	2	50	4 - 93
Metabolic/Electrolyte Disorders	13	15	5 - 52	19	5	7 - 39
Pulmonary Disease	43	33	17 - 46	37	32	20 - 51
Renal Failure	1	100	3 -100	4	75	11 - 87
Severe Acute Heart Disease	9	22	15 - 68	7	43	20 - 83
Severe Chronic Heart Disease	7	29	4 - 69	16	38	9 - 55
Severe Trauma	1	0	0 - 98	0	-	-
Gastrointestinal Disease	9	0	0 - 97	7	0	0 - 98
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	22	0	0 - 30	29	0	0 - 24
Musculoskeletal/Skin Conditions	12	0	0 - 51	14	0	0 - 87
Neuropsychiatric/Sensory Disease	3	33	0 -100	5	0	0 -100
Urologic Disease	9	0	0 - 77	9	0	0 - 98

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1986

Total Beds (#):	40
Ownership/Control:	Local Government

STAFFING

Interns and Residents:	0
Registered Nurses:	7
Licensed Practical Nurses:	8

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

POTOMAC VALLEY HOSP

SOUTH MINERAL STREET
KEYSER, WV 26726

Medicare Hospital Provider Number: 510061

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	412	17	9 - 17	441	12	9 - 16
Cancer	4	100	12 - 76	9	56	17 - 75
Cerebrovascular Accidents	19	26	12 - 51	19	21	13 - 51
Gastrointestinal Catastrophes	8	75	19 - 76	1	100	1 - 97
Infectious Disease	2	0	3 - 88	2	0	1 - 89
Metabolic/Electrolyte Disorders	11	18	5 - 57	10	40	1 - 68
Pulmonary Disease	33	27	12 - 44	34	6	12 - 33
Renal Failure	0	-	-	4	75	11 - 87
Severe Acute Heart Disease	23	48	19 - 59	29	45	21 - 57
Severe Chronic Heart Disease	24	46	9 - 49	38	24	11 - 39
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	73	4	0 - 24	48	6	0 - 25
Gynecologic Disease	2	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	62	11	0 - 30	66	0	1 - 8
Musculoskeletal/Skin Conditions	29	3	0 - 32	22	0	0 - 46
Neuropsychiatric/Sensory Disease	6	17	0 -100	12	0	0 - 99
Urologic Disease	4	0	0 -100	6	17	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	42
Occupancy Rate (%):	71
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	13
Percent of Physicians Who Are Board Certified Specialists:	54
Interns and Residents:	0
Registered Nurses:	28
Licensed Practical Nurses:	5

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

Potomac
Valley Hospital
167 South Mineral Street, Keyser, WV 26726
Robert L. Rush, Administrator
Phone: WV 304-788-3141 MD 301-786-4396

Provider 510061

October 27, 1988

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2-D-2
6325 Security Boulevard
Baltimore, MD 21207

Dear Ms. Kappert:

REFERENCE: Medicare Hospital Mortality Data: 1987

The data used to compile the statistics upon which the mortality rate is based is not totally accurate. It does not identify all Medicare patients whose last discharge from a hospital in 1987 was this facility. There were those patients whose principal diagnosis ICD-9 code was not one of those selected for the report. There were also those whose principal diagnosis ICD-9 code was not one selected for the report, but the patients were not listed.

While it is true this preliminary data was sent to the facilities for analysis, only a month is allowed for review of the data. Spot checking has revealed several inaccuracies. A total review of the kind that would be necessary would be very time consuming in a small facility such as ours that does not have a computerized Medical Records Department. Given the cost constraints under which health care facilities must now operate, it is not feasible for a department that is not computerized to do such a study.

It is also felt that the categories given are misleading to the general public who will read the published report. The term "cancer" to the general public is an all encompassing one, not one that is limited to the particular ICD-9 codes selected to be included under that heading. Such is the case in other categories also.

The mortality rate should not be released to the public as a correct statistical report until a more accurate method of determination can be developed.

Respectfully,

Harriet [illegible]

PRESTON MEMORIAL HOSP

300 SOUTH PRICE ST
KINGWOOD, WV 26537

Medicare Hospital Provider Number: 510005

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	361	16	10 - 18	358	16	10 - 19
Cancer	3	100	10 - 82	4	75	13 - 86
Cerebrovascular Accidents	16	19	10 - 50	18	28	14 - 55
Gastrointestinal Catastrophes	1	0	2 - 97	4	25	1 - 82
Infectious Disease	10	40	14 - 70	4	25	10 - 84
Metabolic/Electrolyte Disorders	4	25	3 - 80	6	17	1 - 74
Pulmonary Disease	23	26	12 - 49	39	31	15 - 46
Renal Failure	2	50	1 - 93	5	60	12 - 86
Severe Acute Heart Disease	22	45	22 - 63	18	61	21 - 64
Severe Chronic Heart Disease	16	19	9 - 49	15	33	9 - 55
Severe Trauma	1	100	1 - 97	0	-	-
Gastrointestinal Disease	32	3	0 - 48	33	0	0 - 19
Gynecologic Disease	3	0	0 -100	0	-	-
Low-Risk Heart Disease	50	12	0 - 33	57	7	0 - 27
Musculoskeletal/Skin Conditions	23	0	0 - 33	12	0	0 - 99
Neuropsychiatric/Sensory Disease	11	0	0 - 66	9	0	0 - 99
Urologic Disease	5	20	0 -100	6	17	0 - 99

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	57
Occupancy Rate (%):	58
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	21
Licensed Practical Nurses:	11

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

PRINCETON COMMUNITY HOSP

12TH ST EXTENSION
PRINCETON, WV 24740

Medicare Hospital Provider Number: 510046

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,848	10	8 - 13	1,958	10	8 - 13
Cancer	40	50	26 - 59	57	49	30 - 58
Cerebrovascular Accidents	71	31	17 - 40	73	27	17 - 39
Gastrointestinal Catastrophes	13	31	16 - 65	9	22	9 - 65
Infectious Disease	26	31	19 - 56	7	29	10 - 72
Metabolic/Electrolyte Disorders	12	42	9 - 63	11	18	10 - 59
Pulmonary Disease	89	20	14 - 34	77	29	18 - 41
Renal Failure	10	20	16 - 75	5	0	18 - 81
Severe Acute Heart Disease	73	38	24 - 49	67	34	26 - 50
Severe Chronic Heart Disease	65	31	12 - 35	83	20	15 - 34
Severe Trauma	2	0	1 - 90	2	0	0 - 94
Gastrointestinal Disease	152	5	1 - 10	146	4	1 - 10
Gynecologic Disease	11	0	0 -100	20	0	0 -100
Low-Risk Heart Disease	269	4	2 - 7	237	3	2 - 7
Musculoskeletal/Skin Conditions	217	0	1 - 5	239	1	0 - 5
Neuropsychiatric/Sensory Disease	92	0	0 - 8	118	1	0 - 10
Urologic Disease	100	1	1 - 8	111	2	1 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	211
Occupancy Rate (%):	77
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	63
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	0
Registered Nurses:	152
Licensed Practical Nurses:	113

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

PUTNAM GENERAL HOSPITAL

1400 HOSPITAL DRIVE
HURRICANE , WV 25526

Medicare Hospital Provider Number: 510085

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	602	16	11 - 18	539	16	11 - 18
Cancer	19	68	18 - 60	12	42	16 - 68
Cerebrovascular Accidents	26	19	11 - 43	18	33	11 - 54
Gastrointestinal Catastrophes	8	38	11 - 72	4	25	6 - 81
Infectious Disease	10	60	13 - 69	14	43	18 - 68
Metabolic/Electrolyte Disorders	19	26	9 - 52	6	50	2 - 76
Pulmonary Disease	53	30	18 - 45	51	33	16 - 44
Renal Failure	3	67	8 - 91	1	100	0 - 98
Severe Acute Heart Disease	25	56	25 - 63	35	54	22 - 56
Severe Chronic Heart Disease	33	24	12 - 42	36	11	13 - 37
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	49	0	1 - 11	34	3	0 - 37
Gynecologic Disease	2	0	0 -100	3	0	0 -100
Low-Risk Heart Disease	80	2	1 - 11	58	2	1 - 13
Musculoskeletal/Skin Conditions	32	3	0 - 50	31	3	0 - 55
Neuropsychiatric/Sensory Disease	6	0	0 - 81	8	38	0 -100
Urologic Disease	30	3	0 - 65	31	6	1 - 29

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	68
Ownership/Control:	Local Government

STAFFING

Interns and Residents:	0
Registered Nurses:	45
Licensed Practical Nurses:	12

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

HCA Putnam General Hospital

51-0085

October 3, 1988

Health Standards and Quality Bureau
Health Care Financing Administration
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

Attention: Mrs. Sandra Kappert

Dear Mrs. Kappert:

The following corrections have been made in the mortality list for Putnam General Hospital:

Page 1	[redacted]	Correct Date: 3/30/87
Page 4	[redacted]	Correct Date: 6/08/87
Page 10	[redacted]	Correct Date: 2/18/87

If you have any questions, please feel free to contact me.

Sincerely,

Dennis P. Bridgeman

Dennis P. Bridgeman
Administrator

DPB:pbs

RALEIGH GENERAL HOSP

1710 HARPER ROAD
BECKLEY, WV 25801

Medicare Hospital Provider Number: 510070

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,940	15	10 - 14	2,174	14	9 - 14
Cancer	82	54	32 - 58	78	59	33 - 59
Cerebrovascular Accidents	74	38	16 - 39	81	38	18 - 40
Gastrointestinal Catastrophes	16	31	10 - 57	18	56	18 - 64
Infectious Disease	22	23	15 - 53	21	43	18 - 61
Metabolic/Electrolyte Disorders	27	56	19 - 58	28	32	10 - 48
Pulmonary Disease	80	38	16 - 39	93	33	15 - 37
Renal Failure	8	38	10 - 77	9	44	6 - 73
Severe Acute Heart Disease	86	35	26 - 48	100	45	27 - 49
Severe Chronic Heart Disease	106	29	13 - 32	114	28	16 - 34
Severe Trauma	8	25	7 - 67	9	22	7 - 64
Gastrointestinal Disease	152	3	1 - 8	182	2	1 - 7
Gynecologic Disease	22	0	0 -100	26	0	0 -100
Low-Risk Heart Disease	300	2	2 - 6	300	2	1 - 6
Musculoskeletal/Skin Conditions	130	2	0 - 9	127	1	0 - 8
Neuropsychiatric/Sensory Disease	74	4	0 - 20	137	2	0 - 11
Urologic Disease	105	0	0 - 9	114	3	0 - 21

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 238
Occupancy Rate (%): 67
Ownership/Control: Private, For Profit

STAFFING

Total Number of Physicians: 117
Percent of Physicians Who Are Board Certified Specialists: 66
Interns and Residents: 0
Registered Nurses: 104
Licensed Practical Nurses: 91

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

REYNOLDS MEM HOSP

800 WHEELING AVE
GLEN DALE, WV 26038

Medicare Hospital Provider Number: 510013

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,206	12	10 - 15	1,183	13	9 - 14
Cancer	50	46	29 - 59	54	48	29 - 58
Cerebrovascular Accidents	42	29	15 - 43	38	37	13 - 44
Gastrointestinal Catastrophes	8	38	12 - 73	7	29	7 - 71
Infectious Disease	13	31	18 - 67	11	27	17 - 68
Metabolic/Electrolyte Disorders	12	0	9 - 43	9	11	3 - 58
Pulmonary Disease	84	24	17 - 38	68	24	12 - 35
Renal Failure	7	71	17 - 84	4	100	9 - 78
Severe Acute Heart Disease	47	38	23 - 52	45	51	25 - 55
Severe Chronic Heart Disease	60	17	14 - 34	68	29	14 - 37
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	110	2	1 - 9	93	2	1 - 10
Gynecologic Disease	7	0	0 -100	8	0	0 -100
Low-Risk Heart Disease	185	5	1 - 9	222	2	2 - 7
Musculoskeletal/Skin Conditions	87	6	0 - 22	111	2	0 - 11
Neuropsychiatric/Sensory Disease	17	0	0 - 91	21	0	0 - 87
Urologic Disease	37	0	0 - 51	49	2	0 - 32

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	150
Occupancy Rate (%):	62
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	48
Percent of Physicians Who Are Board Certified Specialists:	48
Interns and Residents:	0
Registered Nurses:	128
Licensed Practical Nurses:	79

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

October 4, 1988

Reynolds Memorial Hospital, Inc.
800 Wheeling Avenue
Glen Dale, West Virginia 26038
Tel. 304 845-3211

Ms. Sandra Kappert
Health Standards and Quality Bureau
Health Care Finance Administration
2 - D - 2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland 21207

RE: Medicare Mortality Data

Dear Ms. Kappert,

We have reviewed the Medicare mortality data for our institution in calendar 1987. It appears to be correct.

However, the statistical information that HCFA obtained from AHA concerning individual hospital characteristics contains inconsistencies with our data. These are:

	AS REPORTED	SHOULD BE
1. Occupancy rate	51%	66%
2. Percent of physicians who are board certified	33%	38%
3. Coronary care unit	No	Yes

Please make these changes to our data prior to its release in December. If you need additional information, please contact me.

Sincerely,

John A. Sicurella
Executive Director

JAS:jks

RICHWOOD AREA HOSP

RIVERSIDE ADDITION
RICHWOOD, WV 26261

Medicare Hospital Provider Number: 510016

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	157	14	10 - 22	211	15	9 - 20
Cancer	2	50	4 - 92	7	43	11 - 75
Cerebrovascular Accidents	7	14	6 - 64	11	27	9 - 60
Gastrointestinal Catastrophes	0	-	-	1	0	0 - 99
Infectious Disease	3	0	7 - 81	2	0	1 - 89
Metabolic/Electrolyte Disorders	3	67	1 - 90	4	0	3 - 71
Pulmonary Disease	22	32	10 - 50	26	27	17 - 52
Renal Failure	2	100	7 - 91	2	50	6 - 95
Severe Acute Heart Disease	9	33	18 - 75	7	57	11 - 74
Severe Chronic Heart Disease	11	9	12 - 53	15	33	9 - 56
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	12	8	0 - 67	18	0	0 - 91
Gynecologic Disease	2	0	0 -100	5	0	0 -100
Low-Risk Heart Disease	34	0	1 - 16	39	0	1 - 14
Musculoskeletal/Skin Conditions	7	0	0 -100	10	10	0 -100
Neuropsychiatric/Sensory Disease	4	25	0 -100	7	14	0 -100
Urologic Disease	0	-	-	5	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	35
Occupancy Rate (%):	23
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	7
Percent of Physicians Who Are Board Certified Specialists:	29
Interns and Residents:	0
Registered Nurses:	10
Licensed Practical Nurses:	1

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ROANE GEN HOSP

200 HOSPITAL DRIVE
SPENCER, WV 25276

Medicare Hospital Provider Number: 510081

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	410	14	10 - 18	564	13	9 - 15
Cancer	4	50	8 - 84	8	75	23 - 80
Cerebrovascular Accidents	16	50	10 - 57	23	43	15 - 54
Gastrointestinal Catastrophes	6	17	6 - 70	5	40	5 - 78
Infectious Disease	1	0	2 - 97	0	-	-
Metabolic/Electrolyte Disorders	11	18	6 - 57	7	43	9 - 73
Pulmonary Disease	56	27	17 - 42	50	24	14 - 40
Renal Failure	0	-	-	2	100	7 - 92
Severe Acute Heart Disease	20	60	22 - 64	18	39	19 - 62
Severe Chronic Heart Disease	29	24	12 - 44	39	31	10 - 40
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	25	0	1 - 22	54	2	1 - 14
Gynecologic Disease	3	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	73	4	1 - 15	99	5	1 - 13
Musculoskeletal/Skin Conditions	20	0	0 - 85	47	0	0 - 14
Neuropsychiatric/Sensory Disease	7	14	0 -100	10	0	0 - 94
Urologic Disease	14	7	0 - 96	21	0	0 - 44

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	80
Occupancy Rate (%):	38
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	50
Interns and Residents:	0
Registered Nurses:	25
Licensed Practical Nurses:	28

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SISTERVILLE GENERAL HOSP

314 S WELLS ST
SISTERSVILLE, WV 26175

Medicare Hospital Provider Number: 510065

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	141	23	11 - 26	149	18	8 - 21
Cancer	3	100	17 - 89	4	100	21 - 84
Cerebrovascular Accidents	9	33	6 - 64	1	0	0 - 98
Gastrointestinal Catastrophes	2	0	4 - 89	1	0	1 - 97
Infectious Disease	1	0	0 - 98	2	0	4 - 88
Metabolic/Electrolyte Disorders	10	40	6 - 65	5	0	3 - 65
Pulmonary Disease	14	29	10 - 57	14	43	11 - 60
Renal Failure	2	100	11 - 96	2	100	6 - 91
Severe Acute Heart Disease	10	30	13 - 66	8	50	13 - 73
Severe Chronic Heart Disease	12	50	7 - 60	6	33	2 - 74
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	15	0	0 - 41	13	0	0 - 65
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	14	14	0 - 84	22	5	0 - 56
Musculoskeletal/Skin Conditions	6	17	0 -100	12	17	0 -100
Neuropsychiatric/Sensory Disease	5	0	0 -100	8	0	0 -100
Urologic Disease	2	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	14
Occupancy Rate (%):	37
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	3
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	9
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SOUTH CHARLESTON COMM HOSP INC

30 MACCORKLE AVE
SOUTH CHARLESTON, WV 25303

Medicare Hospital Provider Number: 510040

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	98	6	3 - 14	184	7	5 - 14
Cancer	1	0	0 - 99	1	0	0 - 98
Cerebrovascular Accidents	0	-	-	3	33	6 - 87
Gastrointestinal Catastrophes	2	0	3 - 88	5	40	8 - 80
Infectious Disease	0	-	-	1	0	0 - 98
Metabolic/Electrolyte Disorders	2	50	1 - 93	4	25	1 - 83
Pulmonary Disease	5	20	1 - 79	12	0	12 - 43
Renal Failure	1	0	2 - 97	0	-	-
Severe Acute Heart Disease	0	-	-	1	0	0 - 98
Severe Chronic Heart Disease	5	20	5 - 74	6	17	4 - 68
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	11	9	0 - 98	16	13	0 - 76
Gynecologic Disease	4	0	0 -100	0	-	-
Low-Risk Heart Disease	12	0	0 - 99	25	4	0 - 48
Musculoskeletal/Skin Conditions	17	0	0 - 90	28	0	0 - 59
Neuropsychiatric/Sensory Disease	6	0	0 -100	18	0	0 -100
Urologic Disease	4	0	0 -100	1	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	34
Occupancy Rate (%):	44
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	(not available)
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	9
Registered Nurses:	17
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST FRANCIS HOSP

333 LAIDLEY ST
CHARLESTON, WV 25301

Medicare Hospital Provider Number: 510031

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,613	10	9 - 13	1,634	10	10 - 14
Cancer	78	38	27 - 52	94	37	30 - 53
Cerebrovascular Accidents	28	25	13 - 46	27	15	16 - 45
Gastrointestinal Catastrophes	8	25	10 - 68	12	42	21 - 74
Infectious Disease	16	19	19 - 60	6	17	8 - 71
Metabolic/Electrolyte Disorders	9	33	5 - 65	19	32	13 - 56
Pulmonary Disease	102	24	17 - 37	125	20	18 - 36
Renal Failure	4	100	17 - 84	8	50	14 - 82
Severe Acute Heart Disease	49	35	25 - 53	46	20	27 - 51
Severe Chronic Heart Disease	74	23	14 - 35	80	19	16 - 34
Severe Trauma	0	-	-	1	0	1 - 97
Gastrointestinal Disease	160	2	1 - 8	125	2	1 - 9
Gynecologic Disease	35	3	0 - 97	22	5	0 - 99
Low-Risk Heart Disease	208	3	1 - 7	198	3	1 - 7
Musculoskeletal/Skin Conditions	100	2	0 - 11	98	1	0 - 9
Neuropsychiatric/Sensory Disease	56	0	0 - 15	91	0	0 - 8
Urologic Disease	113	1	0 - 9	117	1	0 - 8

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	206
Occupancy Rate (%):	59
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	106
Percent of Physicians Who Are Board Certified Specialists:	65
Interns and Residents:	0
Registered Nurses:	108
Licensed Practical Nurses:	43

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPH HOSPITAL

AMALIA DRIVE
BUCKHANNON , WV 26201

Medicare Hospital Provider Number: 510053

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	575	16	10 - 17	474	11	8 - 15
Cancer	14	71	19 - 66	4	50	3 - 82
Cerebrovascular Accidents	21	33	15 - 54	16	38	10 - 56
Gastrointestinal Catastrophes	0	-	-	1	0	0 -100
Infectious Disease	6	50	5 - 75	5	60	13 - 83
Metabolic/Electrolyte Disorders	9	67	7 - 66	17	29	7 - 53
Pulmonary Disease	32	44	13 - 48	25	20	14 - 48
Renal Failure	4	50	12 - 91	0	-	-
Severe Acute Heart Disease	29	21	25 - 56	21	33	23 - 63
Severe Chronic Heart Disease	36	31	15 - 45	21	24	10 - 48
Severe Trauma	2	50	0 - 96	1	0	1 - 97
Gastrointestinal Disease	51	2	0 - 19	34	6	0 - 51
Gynecologic Disease	6	0	0 -100	11	0	0 -100
Low-Risk Heart Disease	111	5	1 - 11	85	1	1 - 9
Musculoskeletal/Skin Conditions	33	3	0 - 68	44	2	0 - 20
Neuropsychiatric/Sensory Disease	15	0	0 - 99	15	7	0 -100
Urologic Disease	26	4	0 - 70	4	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	95
Occupancy Rate (%):	60
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	23
Percent of Physicians Who Are Board Certified Specialists:	52
Interns and Residents:	0
Registered Nurses:	50
Licensed Practical Nurses:	13

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

ST JOSEPHS HOSP
19TH ST MURDOCK AVE
PARKERSBURG , WV 26101

Medicare Hospital Provider Number: 510033

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,280	11	9 - 13	2,318	11	9 - 13
Cancer	68	32	28 - 54	56	38	28 - 56
Cerebrovascular Accidents	80	30	17 - 39	92	29	19 - 39
Gastrointestinal Catastrophes	19	32	13 - 57	21	52	13 - 57
Infectious Disease	16	25	20 - 64	15	13	16 - 56
Metabolic/Electrolyte Disorders	37	19	12 - 43	47	19	11 - 40
Pulmonary Disease	121	28	16 - 35	100	22	15 - 35
Renal Failure	12	67	19 - 78	15	47	15 - 74
Severe Acute Heart Disease	79	41	27 - 51	93	35	28 - 50
Severe Chronic Heart Disease	109	26	15 - 33	109	25	15 - 33
Severe Trauma	6	33	4 - 74	6	50	3 - 75
Gastrointestinal Disease	188	3	1 - 8	213	2	1 - 7
Gynecologic Disease	26	0	0 -100	35	0	0 -100
Low-Risk Heart Disease	276	4	1 - 7	246	4	1 - 7
Musculoskeletal/Skin Conditions	304	1	1 - 5	275	1	0 - 5
Neuropsychiatric/Sensory Disease	67	7	0 - 28	67	3	0 - 22
Urologic Disease	103	1	1 - 8	121	3	0 - 15

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	296
Occupancy Rate (%):	74
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	96
Percent of Physicians Who Are Board Certified Specialists:	51
Interns and Residents:	0
Registered Nurses:	265
Licensed Practical Nurses:	88

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

ST.
JOSEPH'S
HOSPITAL

October 21, 1988

Medicare Provider # 51-0033

Ms. Sandra Kappert
Health Care Financing Administration
Health Standards and Quality Bureau
Meadows East Building, 2 - D - 2
6325 Security Boulevard
Baltimore, MD 21207

Dear Ms. Kappert:

Thank you for the opportunity to comment on the mortality data. Below I have the comments for publication.

COMMENTS

St. Joseph's Hospital is a general acute care facility of 375 licensed beds serving primarily eight West Virginia and three Ohio counties in the Mid-Ohio Valley Region. Located in Parkersburg, West Virginia, the hospital serves a city that borders the Ohio River and is comprised of large chemical and industrial metal manufacturers. St. Joseph's was established in 1900 and is sponsored by the Sister of St. Joseph's of Wheeling, West Virginia.

We appreciate the opportunity to review the data prior to the date of release to the public. Corrections were submitted which included hospital bed size and errors in dates for four patients.

St. Joseph's Hospital mortality rates are all in the range of predicted mortality rates, however the hospital wishes to comment on the category of renal disease. The rate is at the higher level of the range. The renal disease rate can be attributed to the fact that the hospital's renal dialysis unit solely serves an eleven county region and also patients beyond that region.

Very truly yours,

Arthur A. Maher

Arthur A. Maher, President
and Chief Executive Officer

Enclosures

VHA
Partner–VHA Mid-Atlantic
Affiliate of the Voluntary
Hospitals of America System.

ST MARYS HOSP

2900 1ST AVE
HUNTINGTON, WV 25701

Medicare Hospital Provider Number: 510007

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,335	13	10 - 14	3,222	14	10 - 15
Cancer	199	43	33 - 52	190	43	32 - 52
Cerebrovascular Accidents	142	25	18 - 34	122	28	17 - 35
Gastrointestinal Catastrophes	24	29	19 - 59	29	14	21 - 52
Infectious Disease	23	48	19 - 61	32	34	20 - 55
Metabolic/Electrolyte Disorders	24	33	9 - 50	25	44	8 - 50
Pulmonary Disease	154	26	18 - 36	155	30	18 - 36
Renal Failure	13	31	13 - 71	10	40	14 - 77
Severe Acute Heart Disease	164	40	27 - 45	161	43	28 - 46
Severe Chronic Heart Disease	148	23	14 - 29	151	27	15 - 31
Severe Trauma	9	33	8 - 67	13	38	9 - 62
Gastrointestinal Disease	233	3	1 - 7	187	5	1 - 9
Gynecologic Disease	30	0	0 -100	29	0	0 -100
Low-Risk Heart Disease	495	3	2 - 5	474	2	2 - 5
Musculoskeletal/Skin Conditions	261	1	1 - 5	231	2	1 - 6
Neuropsychiatric/Sensory Disease	101	4	0 - 15	156	2	0 - 8
Urologic Disease	184	3	0 - 10	200	1	0 - 7

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	440
Occupancy Rate (%):	67
Ownership/Control:	Church

STAFFING

Total Number of Physicians:	227
Percent of Physicians Who Are Board Certified Specialists:	72
Interns and Residents:	24
Registered Nurses:	385
Licensed Practical Nurses:	105

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

STEVENS CLINIC HOSP

US 52 SOUTH
WELCH, WV 24801

Medicare Hospital Provider Number: 510064

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	423	14	9 - 17	435	18	11 - 19
Cancer	10	70	21 - 75	13	69	27 - 76
Cerebrovascular Accidents	17	29	9 - 52	16	19	10 - 51
Gastrointestinal Catastrophes	2	50	6 - 94	9	56	11 - 70
Infectious Disease	12	25	13 - 62	9	56	15 - 74
Metabolic/Electrolyte Disorders	5	20	1 - 77	9	56	5 - 67
Pulmonary Disease	35	31	12 - 44	44	34	13 - 43
Renal Failure	1	100	3 - 98	1	0	3 - 99
Severe Acute Heart Disease	23	35	17 - 55	26	38	21 - 58
Severe Chronic Heart Disease	28	14	10 - 38	32	28	8 - 40
Severe Trauma	0	-	-	1	100	0 - 98
Gastrointestinal Disease	30	3	0 - 41	38	5	0 - 45
Gynecologic Disease	2	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	94	3	1 - 11	81	0	1 - 7
Musculoskeletal/Skin Conditions	8	13	0 -100	7	0	0 -100
Neuropsychiatric/Sensory Disease	3	0	0 -100	3	0	0 -100
Urologic Disease	7	0	0 -100	4	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1984

Total Beds (#): 124
Ownership/Control: Private, For Profit

STAFFING

Interns and Residents: 0
Registered Nurses: 39
Licensed Practical Nurses: 33

SPECIALTY SERVICES

Shock/Trauma Unit: Yes
Burn Unit: No
Medical/Surgical Intensive Care: Yes
Cardiac Intensive Care: Yes
Organ Transplant Service: No
Hospice Care: No

STONEWALL JACKSON MEM HOSP

RT 4-BOX 10
WESTON, WV 26452

Medicare Hospital Provider Number: 510038

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	614	11	10 - 16	588	11	9 - 16
Cancer	5	80	19 - 85	4	75	19 - 93
Cerebrovascular Accidents	23	35	12 - 51	26	35	16 - 53
Gastrointestinal Catastrophes	4	50	4 - 82	4	50	5 - 82
Infectious Disease	4	75	2 - 81	4	0	4 - 71
Metabolic/Electrolyte Disorders	18	39	9 - 55	11	18	5 - 56
Pulmonary Disease	74	15	17 - 36	44	18	14 - 40
Renal Failure	1	100	2 - 97	1	100	1 -100
Severe Acute Heart Disease	41	39	24 - 54	25	32	23 - 60
Severe Chronic Heart Disease	39	13	14 - 37	52	21	14 - 38
Severe Trauma	1	0	1 - 97	0	-	-
Gastrointestinal Disease	37	0	1 - 14	34	3	0 - 29
Gynecologic Disease	9	0	0 -100	8	13	0 -100
Low-Risk Heart Disease	78	1	1 - 9	99	1	2 - 8
Musculoskeletal/Skin Conditions	47	2	0 - 27	48	2	0 - 23
Neuropsychiatric/Sensory Disease	7	0	0 - 99	14	0	0 - 97
Urologic Disease	43	0	0 - 27	34	0	0 - 70

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	70
Occupancy Rate (%):	43
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	39
Percent of Physicians Who Are Board Certified Specialists:	62
Interns and Residents:	0
Registered Nurses:	46
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SUMMERS COUNTY HOSPITAL

PO BOX 940 TERRACE ST
HINTON, WV 25951

Medicare Hospital Provider Number: 510080

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	457	12	8 - 15	457	15	10 - 17
Cancer	4	50	7 - 83	7	71	21 - 82
Cerebrovascular Accidents	16	31	9 - 54	13	23	12 - 58
Gastrointestinal Catastrophes	1	100	2 - 97	3	0	2 - 80
Infectious Disease	8	38	15 - 75	7	14	6 - 65
Metabolic/Electrolyte Disorders	5	20	1 - 78	13	15	7 - 53
Pulmonary Disease	60	30	12 - 38	54	28	15 - 41
Renal Failure	2	0	8 - 92	0	-	-
Severe Acute Heart Disease	15	27	18 - 62	23	65	23 - 61
Severe Chronic Heart Disease	28	25	8 - 42	28	14	12 - 41
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	32	6	0 - 46	26	4	0 - 46
Gynecologic Disease	1	0	0 -100	0	-	-
Low-Risk Heart Disease	75	1	1 - 10	77	1	1 - 10
Musculoskeletal/Skin Conditions	38	3	0 - 41	35	0	0 - 26
Neuropsychiatric/Sensory Disease	7	0	0 -100	3	0	0 -100
Urologic Disease	6	0	0 -100	9	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	95
Occupancy Rate (%):	43
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	24
Licensed Practical Nurses:	31

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

SUMMERVILLE MEMORIAL HOSP

PO BOX 506
SUMMERSVILLE, WV 26651

Medicare Hospital Provider Number: 510082

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	277	16	10 - 20	266	12	9 - 17
Cancer	4	75	14 - 87	6	67	16 - 81
Cerebrovascular Accidents	22	23	10 - 46	15	40	10 - 58
Gastrointestinal Catastrophes	2	100	10 - 94	2	0	4 - 88
Infectious Disease	2	0	2 - 88	1	0	0 - 98
Metabolic/Electrolyte Disorders	7	29	3 - 70	2	0	5 - 89
Pulmonary Disease	30	23	9 - 41	22	18	7 - 43
Renal Failure	2	100	2 - 89	1	100	0 - 98
Severe Acute Heart Disease	17	35	15 - 59	13	31	18 - 66
Severe Chronic Heart Disease	19	0	18 - 38	8	13	6 - 59
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	16	6	0 - 95	8	13	0 -100
Gynecologic Disease	1	0	0 -100	1	0	0 -100
Low-Risk Heart Disease	31	0	1 - 17	44	2	1 - 17
Musculoskeletal/Skin Conditions	16	6	0 - 93	19	0	0 - 82
Neuropsychiatric/Sensory Disease	6	0	0 -100	5	0	0 -100
Urologic Disease	6	0	0 -100	7	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	74
Occupancy Rate (%):	77
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	16
Percent of Physicians Who Are Board Certified Specialists:	6
Interns and Residents:	0
Registered Nurses:	22
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

THE EYE&EAR CLINIC OF CHARLESTON

1306 KANAWHA BL E
CHARLESTON, WV 25301

Medicare Hospital Provider Number: 510059

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	188	1	2 - 7	231	1	2 - 7
Cancer	5	0	7 - 64	1	0	0 - 98
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	2	0	2 - 88
Metabolic/Electrolyte Disorders	1	0	0 - 99	1	100	1 - 97
Pulmonary Disease	0	-	-	0	-	-
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	0	-	-	0	-	-
Severe Chronic Heart Disease	0	-	-	0	-	-
Severe Trauma	1	0	0 - 99	0	-	-
Gastrointestinal Disease	2	0	0 -100	11	0	0 - 92
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	0	-	-	1	0	0 -100
Musculoskeletal/Skin Conditions	1	0	0 -100	6	0	0 -100
Neuropsychiatric/Sensory Disease	100	0	0 - 7	139	1	1 - 7
Urologic Disease	0	-	-	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	26
Occupancy Rate (%):	15
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	8
Percent of Physicians Who Are Board Certified Specialists:	0
Interns and Residents:	0
Registered Nurses:	19
Licensed Practical Nurses:	3

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

TUCKER CO HOSP
307 MAIN ST
PARSONS, WV 26287

Medicare Hospital Provider Number: 510074

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	76	12	5 - 21	124	9	6 - 18
Cancer	1	100	3 - 98	2	100	9 - 93
Cerebrovascular Accidents	5	20	3 - 74	3	33	2 - 86
Gastrointestinal Catastrophes	0	-	-	2	0	2 - 88
Infectious Disease	0	-	-	0	-	-
Metabolic/Electrolyte Disorders	2	50	0 - 96	2	0	0 - 98
Pulmonary Disease	2	50	1 - 93	1	100	2 - 97
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	8	38	7 - 68	9	56	16 - 74
Severe Chronic Heart Disease	2	0	0 - 95	4	25	8 - 81
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	8	0	0 - 97	10	0	0 - 91
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	16	0	0 - 90	14	0	0 - 53
Musculoskeletal/Skin Conditions	2	0	0 -100	19	0	0 - 97
Neuropsychiatric/Sensory Disease	2	50	0 -100	7	14	0 - 96
Urologic Disease	2	0	0 -100	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	25
Occupancy Rate (%):	28
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	5
Percent of Physicians Who Are Board Certified Specialists:	100
Interns and Residents:	0
Registered Nurses:	8
Licensed Practical Nurses:	6

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

UNITED HOSP CTR INC

PO BOX 1605
CLARKSBURG, WV 26301

Medicare Hospital Provider Number: 510006

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	3,165	13	11 - 15	3,289	13	10 - 14
Cancer	101	40	30 - 53	125	46	32 - 55
Cerebrovascular Accidents	125	30	21 - 39	136	34	21 - 38
Gastrointestinal Catastrophes	23	26	14 - 53	21	52	15 - 59
Infectious Disease	36	28	21 - 53	23	17	18 - 53
Metabolic/Electrolyte Disorders	29	45	15 - 54	32	22	13 - 46
Pulmonary Disease	175	28	20 - 37	166	24	17 - 34
Renal Failure	26	46	20 - 72	19	58	19 - 75
Severe Acute Heart Disease	119	57	30 - 50	115	46	29 - 49
Severe Chronic Heart Disease	184	29	17 - 31	190	31	18 - 33
Severe Trauma	9	22	12 - 67	6	17	4 - 70
Gastrointestinal Disease	285	4	2 - 8	301	4	2 - 7
Gynecologic Disease	43	0	0 - 17	31	3	0 -100
Low-Risk Heart Disease	438	2	2 - 6	480	4	2 - 6
Musculoskeletal/Skin Conditions	159	1	1 - 6	216	1	1 - 6
Neuropsychiatric/Sensory Disease	112	4	0 - 14	124	2	0 - 10
Urologic Disease	173	2	0 - 8	164	2	0 - 9

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	330
Occupancy Rate (%):	68
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	95
Percent of Physicians Who Are Board Certified Specialists:	66
Interns and Residents:	(not available)
Registered Nurses:	(not available)
Licensed Practical Nurses:	(not available)

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

510006

UHC

United Hospital Center

Clarksburg, West Virginia

COMMENTS ON THE HCFA MORTALITY DATA

October 19, 1988

I. CHARACTER STATEMENT

United Hospital Center, located in Clarksburg, West Virginia, is licensed for 396 beds and presently serves patients from a multi-county region of North Central West Virginia, characterized as a rural area with mountainous terrain. A primary service area is composed of approximately 122,618 persons in five counties; a contiguous service area of 6 counties has a population of approximately 150,859. Thus, nearly 275,000 persons reside in this 11 county area which includes 15 percent of the population who are over the age of 65.

In addition to the significant elderly/aging population, 59 percent of the service area population are above 200 percent of the poverty level; 15 percent are below 100 percent of the poverty level; 26 percent are between 100 to 199 percent of the poverty level. The Department of Human Services Office estimates that 15 percent are recipients of Medicaid and other public welfare services.

Derived from the 1986 Vital Statistics Report issued from the West Virginia Department of Health, in many cases this 11 county region has a higher mortality rate than the entire state of West Virginia and the United States. Specifically, for disease of the heart, the 1986 data (most recent available) shows a rate of 401.5 deaths/100,000 population for both the UHC service area and the state of West Virginia compared to a national rate of 317.2 deaths/100,000.

Malignant neoplasms account for a service area rate of 254.4 deaths/100,000 compared to a West Virginia rate of 224.8 deaths/100,000 and a national rate of 193.4 deaths/100,000. Cerebrovascular diseases account for a service area rate of 82.9 deaths/100,000 compared to a West Virginia rate of 70.7 deaths/100,000 and a national rate of 61.2 deaths/100,000. The service area also has a high rate of COPD and related pulmonary disease due to the influence of coal mining as the primary employment for the region throughout the 1930-50's. The region has an unusually high federally adjusted unemployment rate for the 1980's, ranging from 12 to 18 percent from the various counties included.

II. DATA VERIFICATIONS

Results released from HCFA show United Hospital Center's actual mortality rates fall within the range of predicted mortality rates in 15 of 16 diagnostic categories. In one category, severe acute heart disease the hospital's actual mortality rate is 7% above the predicted rate. The following will verify the data complied by HCFA and provide in-depth analysis of the severe acute heart disease category. The data used by HCFA indicates that a total of 431 Medicare patients admitted to United Hospital Center and whose last discharge in 1987 was from United Hospital Center died within 30 days of admission. Of these, 346 died within the hospital while 85 died after discharge. The number of patients who died in the hospital is accurate. The 85 patients who died after discharge were in fact discharged alive although we have no way to verify their deaths after discharge.

Of the 431 total deaths, it was noted that 43% of those were over the age of 80 and 40% were within the 70 to 80 age group. In eight of the sixteen categories 50% or greater of the deaths were patients in the age group of 80 or over.

The in-depth analysis of the category severe acute heart disease is as follows: There were a total of 68 deaths in this category, 3 of which were discharged alive. All of these records were reviewed and 62% of these deaths were felt to be high risk based on complicating conditions affecting the patient's principal illness such as age, severe hypotension, mechanical ventilation and cardiogenic shock on admission, and multi-system disease. These patients were extremely complicated and had many problems other than the principal cardiac diagnosis with which they were admitted and which certainly contributed to their deaths in many instances. There were 3 cases in which the principal diagnosis was felt to be incorrect and therefore should not have fallen into this category. This would have changed our actual mortality rate to 51%. Of greatest significance is the fact that the 62% of those with the high risk factors stated above have a predicted mortality rate much greater than 30 to 50%. (Closer to 80%)

III. OTHER CONSIDERATIONS

Social and economic factors in the United Hospital Center service area such as the high number of medically indigent/needy families and the unemployed present great demands to this health care facility. Many individuals fail to seek adequate medical attention because of financial barriers which lead to untimely admissions.

Personal health habits including but not limited to compliance with physician recommended diets and medication plans are not always followed by the patients. Complications may arise or intensify when individuals elect to be cared for at home, away from professional health care monitoring. These factors many times result in untimely admission to the hospital. These factors are cultural characteristics of the area.

Granted HCFA made some changes in their statistical methods; however, it still creates a misleading picture for identifying quality patient care at United Hospital Center. Determinations on quality of care should not be based on whether or not a patient died within 30 days of his/her hospital admission, but should also include all other significant factors including the ones previously mentioned.

In conclusion, the hospital governing body, administrative staff, medical staff, and all support service staff participate in an on-going review and evaluation process to improve and ensure quality care. Mortality chart review is only one of many quality assurance activities performed in this institution.

WEBSTER CTY MEMORIAL HOSP

324 MILLER MTN DR
WEBSTER SPRINGS, WV 26288

Medicare Hospital Provider Number: 510025

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	201	13	9 - 19	164	21	11 - 24
Cancer	6	67	23 - 89	3	67	4 - 86
Cerebrovascular Accidents	12	8	10 - 49	11	36	13 - 66
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	2	50	4 - 92	3	33	5 - 87
Metabolic/Electrolyte Disorders	12	25	8 - 59	5	60	6 - 78
Pulmonary Disease	10	40	6 - 63	21	62	14 - 55
Renal Failure	0	-	-	2	50	6 - 95
Severe Acute Heart Disease	7	71	15 - 76	11	18	19 - 66
Severe Chronic Heart Disease	11	45	4 - 61	10	30	8 - 62
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	12	0	0 - 68	10	0	0 - 96
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	33	0	0 - 19	28	0	0 - 32
Musculoskeletal/Skin Conditions	15	7	0 - 99	12	8	0 - 99
Neuropsychiatric/Sensory Disease	4	0	0 -100	1	0	0 -100
Urologic Disease	3	0	0 -100	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	35
Occupancy Rate (%):	31
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	7
Percent of Physicians Who Are Board Certified Specialists:	71
Interns and Residents:	0
Registered Nurses:	11
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WEIRTON MED CTR 601 COLLIERS WAY

ST JOHN RD
WEIRTON, WV 26062

Medicare Hospital Provider Number: 510023

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	1,746	11	9 - 13	1,647	12	8 - 13
Cancer	31	52	32 - 68	32	47	21 - 57
Cerebrovascular Accidents	49	22	13 - 38	57	33	17 - 42
Gastrointestinal Catastrophes	9	56	13 - 72	9	78	20 - 74
Infectious Disease	11	9	17 - 60	17	29	13 - 58
Metabolic/Electrolyte Disorders	16	31	9 - 56	16	38	13 - 60
Pulmonary Disease	107	36	17 - 38	103	29	16 - 37
Renal Failure	4	25	10 - 86	11	91	28 - 83
Severe Acute Heart Disease	48	44	27 - 56	42	31	26 - 55
Severe Chronic Heart Disease	121	17	15 - 30	88	25	16 - 36
Severe Trauma	2	0	3 - 88	0	-	-
Gastrointestinal Disease	126	4	0 - 11	127	2	1 - 8
Gynecologic Disease	11	0	0 -100	24	4	0 -100
Low-Risk Heart Disease	295	3	2 - 6	275	3	1 - 6
Musculoskeletal/Skin Conditions	155	5	0 - 12	126	2	0 - 10
Neuropsychiatric/Sensory Disease	74	1	0 - 12	84	4	0 - 19
Urologic Disease	82	4	0 - 28	87	1	0 - 13

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	265
Occupancy Rate (%):	50
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	73
Percent of Physicians Who Are Board Certified Specialists:	59
Interns and Residents:	0
Registered Nurses:	132
Licensed Practical Nurses:	4

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

MEDICARE PROVIDER NO. 51-0023

WEIRTON MEDICAL CENTER

601 COLLIERS WAY
WEIRTON, WEST VIRGINIA 26062-5091
304-797-6000

September 26, 1988

Health Standards and Quality Bureau, HCRA
Attention: Mrs. Sandra Kappert
2-D-2 Meadows East Building
6325 Security Boulevard
Baltimore, Maryland

Dear Mrs. Kappert,

Mortality Information

As in the past, we believe that the statistics, as published by the Health Care Financing Administration, are invalid because they do not measure what you intend to measure, i.e. mortality rates by institution.

Our analysis of your statistics shows that 10% of the deaths occurred on the day of admission. This raises some question regarding the patient's reason for admission, that is: terminally ill, accident, cardiac arrest, stroke. In most cases the hospital, or its medical staff, may have had little or no opportunity to intervene. It is also important to realize that 33% of the deaths did not occur on campus. The same questions arise, that is: Were patients discharged terminally ill; did they expire due to unrelated problems such as automobile accidents, stroke, or cardiac arrest; was the discharge against medical advice. Unfortunately, we are unable to answer these questions with certainty.

Instead of publishing all of these statistics is it possible to save time and money by referring questionable death reviews to the duly constituted professional review organization.

This type of reporting to the public will not provide valid conclusions regarding where to seek healthcare.

Hospital Statistics

The hospital characteristics included with our mortality information are confusing and inaccurate.

Health Standards and Quality Bureau, HCRA
Sandra Kappert
September 26, 1988
Page Two

The American Hospital Association (AHA) 1986 survey included statistics from 7/1/85 through 6/30/86 while your mortality includes basically deaths in calendar year 1987.

It appears that the number of beds at the Weirton Medical Center is 147. The 147 beds are general medical/surgical for adults including gynecology only (AHA pg. 9 item 1). Why do you not count our mixed ICU/CCU and our intermediate unit beds? Although you state we have no coronary care unit it is clear we combine it with intensive care. The public will be misled by your erroneous conclusion.

The statistics reflecting our occupancy are not based on 147 beds, but rather on 265, our total compliment. Please be consistent. 265 beds multiplied by 365 days equals 96,725 divided by 42,140 total patient days equals 43.5% occupancy.

On page 21 of the AHA report we point out that 38 of 70 physicians are Board certified which is 54.2%. Your report says 50%, why not 55%.

Registered nurse statistics are as follows: 124 full-time and 63 part-time. The definition of their status is reflected by whether or not they work more or less than 35 hours. Did you count the 63 as 31.5 or 31.0. The only way we could rationalize your 1.05 RN per bed was as follows: 124 full-time plus 31 part-time equals 155 divided by 147 equals 1.05. The same logic for licensed practical nurses per bed appears to round up to .03%. It is apparent that these conclusions are not accurate nor should they be used for any comparative purpose.

We hope our insight will assist you in the future. Statistics by themselves will only confuse the public.

Sincerely,

Robert J. Turner
Executive Director

dfk

WEIRTON OSTEOPATHIC HOSPITAL

3045 PENNA AVE
WEIRTON, WV 26062

Medicare Hospital Provider Number: 510076

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	71	4	3 - 15	76	8	5 - 19
Cancer	0	-	-	0	-	-
Cerebrovascular Accidents	0	-	-	2	0	2 - 88
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	0	-	-	1	0	0 - 97
Metabolic/Electrolyte Disorders	1	0	0 -100	0	-	-
Pulmonary Disease	10	10	3 - 52	19	11	7 - 40
Renal Failure	0	-	-	1	100	3 -100
Severe Acute Heart Disease	1	0	1 - 97	0	-	-
Severe Chronic Heart Disease	4	0	3 - 70	5	20	2 - 76
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	6	0	0 -100	1	0	0 -100
Gynecologic Disease	3	0	0 - 97	1	0	0 -100
Low-Risk Heart Disease	3	0	0 -100	9	0	0 -100
Musculoskeletal/Skin Conditions	14	0	0 - 99	15	0	0 - 94
Neuropsychiatric/Sensory Disease	3	0	0 -100	1	0	0 -100
Urologic Disease	2	0	0 -100	0	-	-

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	16
Occupancy Rate (%):	56
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	17
Percent of Physicians Who Are Board Certified Specialists:	(not available)
Interns and Residents:	0
Registered Nurses:	6
Licensed Practical Nurses:	0

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	No
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WELCH EMERGENCY HOSPITAL

454 MCDOWELL STREET
WELCH, WV 24801

Medicare Hospital Provider Number: 510086

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	97	16	8 - 23	107	19	9 - 24
Cancer	4	25	7 - 81	3	33	7 - 88
Cerebrovascular Accidents	5	20	2 - 75	2	0	1 - 90
Gastrointestinal Catastrophes	0	-	-	1	0	0 - 99
Infectious Disease	0	-	-	3	67	8 - 88
Metabolic/Electrolyte Disorders	5	20	3 - 75	1	0	0 -100
Pulmonary Disease	10	40	6 - 63	10	40	6 - 64
Renal Failure	1	100	2 - 97	0	-	-
Severe Acute Heart Disease	3	67	3 - 86	9	78	18 - 71
Severe Chronic Heart Disease	10	30	5 - 61	7	14	6 - 64
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	9	0	0 -100	3	0	0 -100
Gynecologic Disease	0	-	-	1	0	0 -100
Low-Risk Heart Disease	9	0	0 - 87	10	0	0 - 90
Musculoskeletal/Skin Conditions	3	0	0 -100	4	0	0 -100
Neuropsychiatric/Sensory Disease	2	0	0 -100	3	0	0 -100
Urologic Disease	1	0	0 -100	2	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: HCFA 1987

Total Beds (#):	124
Ownership/Control:	State Government

STAFFING

Interns and Residents:	0
Registered Nurses:	32
Licensed Practical Nurses:	42

SPECIALTY SERVICES

Shock/Trauma Unit:	No
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WEST VIRGINIA UNIV HOSP

PO BOX 6403
MORGANTOWN, WV 26506

Medicare Hospital Provider Number: 510001

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,448	13	11 - 15	2,413	14	10 - 15
Cancer	133	36	33 - 54	113	42	35 - 58
Cerebrovascular Accidents	81	30	17 - 38	54	46	17 - 44
Gastrointestinal Catastrophes	19	37	20 - 64	20	10	21 - 55
Infectious Disease	19	26	16 - 57	20	70	20 - 61
Metabolic/Electrolyte Disorders	28	39	13 - 52	28	25	13 - 49
Pulmonary Disease	72	35	18 - 42	78	38	16 - 40
Renal Failure	43	37	13 - 61	37	46	16 - 66
Severe Acute Heart Disease	94	43	25 - 48	75	43	30 - 54
Severe Chronic Heart Disease	87	22	16 - 35	80	40	17 - 40
Severe Trauma	8	25	7 - 67	9	22	5 - 63
Gastrointestinal Disease	110	8	1 - 16	98	4	2 - 12
Gynecologic Disease	9	0	0 -100	21	5	0 - 95
Low-Risk Heart Disease	273	5	1 - 8	268	7	2 - 9
Musculoskeletal/Skin Conditions	222	1	1 - 6	222	2	1 - 6
Neuropsychiatric/Sensory Disease	278	2	1 - 6	361	1	1 - 5
Urologic Disease	83	1	0 - 14	87	1	0 - 10

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	361
Occupancy Rate (%):	68
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	218
Percent of Physicians Who Are Board Certified Specialists:	67
Interns and Residents:	199
Registered Nurses:	421
Licensed Practical Nurses:	67

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	Yes
Hospice Care:	No

WETZEL CO HOSP

PO BOX 610 3 BENJAMIN DRIVE
NEW MARTINSVILLE, WV 26155

Medicare Hospital Provider Number: 510072

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	562	14	11 - 17	565	13	10 - 17
Cancer	26	65	32 - 69	12	67	26 - 77
Cerebrovascular Accidents	23	35	14 - 52	22	36	12 - 52
Gastrointestinal Catastrophes	5	0	16 - 72	4	25	5 - 80
Infectious Disease	1	100	2 - 97	3	33	4 - 86
Metabolic/Electrolyte Disorders	14	21	12 - 58	20	5	12 - 42
Pulmonary Disease	44	32	13 - 42	49	20	14 - 39
Renal Failure	1	0	0 -100	0	-	-
Severe Acute Heart Disease	25	32	22 - 58	32	44	22 - 56
Severe Chronic Heart Disease	38	13	12 - 36	44	23	11 - 37
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	55	5	0 - 30	57	2	0 - 15
Gynecologic Disease	6	17	0 - 99	1	0	0 -100
Low-Risk Heart Disease	78	4	1 - 13	91	3	1 - 11
Musculoskeletal/Skin Conditions	45	2	0 - 25	38	0	0 - 16
Neuropsychiatric/Sensory Disease	15	0	0 - 54	9	0	0 - 58
Urologic Disease	21	0	0 - 95	18	0	0 - 92

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	72
Occupancy Rate (%):	49
Ownership/Control:	Local Government

STAFFING

Total Number of Physicians:	59
Percent of Physicians Who Are Board Certified Specialists:	49
Interns and Residents:	0
Registered Nurses:	49
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WHEELING HOSP

MEDICAL PARK
WHEELING, WV 26003

Medicare Hospital Provider Number: 510050

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	2,851	12	10 - 14	2,756	12	9 - 14
Cancer	152	45	32 - 53	93	47	32 - 56
Cerebrovascular Accidents	118	24	17 - 35	96	22	17 - 36
Gastrointestinal Catastrophes	10	30	12 - 67	21	43	15 - 58
Infectious Disease	38	16	22 - 50	47	38	23 - 54
Metabolic/Electrolyte Disorders	31	19	10 - 44	35	20	12 - 44
Pulmonary Disease	156	26	17 - 34	145	21	18 - 35
Renal Failure	11	27	13 - 72	10	60	16 - 79
Severe Acute Heart Disease	102	43	27 - 48	108	49	29 - 50
Severe Chronic Heart Disease	174	14	17 - 29	133	28	15 - 32
Severe Trauma	3	33	3 - 86	2	0	2 - 89
Gastrointestinal Disease	200	5	1 - 9	170	1	1 - 6
Gynecologic Disease	36	0	0 -100	38	0	0 -100
Low-Risk Heart Disease	430	3	2 - 6	440	3	2 - 6
Musculoskeletal/Skin Conditions	313	2	1 - 6	277	3	1 - 6
Neuropsychiatric/Sensory Disease	56	2	0 - 18	148	2	0 - 9
Urologic Disease	117	1	0 - 13	106	4	0 - 16

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	276
Occupancy Rate (%):	73
Ownership/Control:	Private, Non-profit

STAFFING

Total Number of Physicians:	155
Percent of Physicians Who Are Board Certified Specialists:	80
Interns and Residents:	15
Registered Nurses:	260
Licensed Practical Nurses:	45

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	Yes
Organ Transplant Service:	No
Hospice Care:	No

WILLIAMSON MEMORIAL HOSPITAL

COLLEGE HILL
WILLIAMSON, WV 25661

Medicare Hospital Provider Number: 510077

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	386	11	8 - 15	380	17	10 - 18
Cancer	6	50	17 - 84	2	100	6 - 90
Cerebrovascular Accidents	5	0	7 - 64	10	50	9 - 65
Gastrointestinal Catastrophes	3	0	2 - 80	3	33	5 - 86
Infectious Disease	5	60	13 - 84	6	50	10 - 78
Metabolic/Electrolyte Disorders	6	33	6 - 74	21	14	12 - 48
Pulmonary Disease	29	38	10 - 46	24	33	11 - 50
Renal Failure	3	33	4 - 87	6	50	15 - 87
Severe Acute Heart Disease	16	56	20 - 66	21	62	18 - 59
Severe Chronic Heart Disease	25	28	10 - 46	21	33	8 - 49
Severe Trauma	0	-	-	1	0	0 - 99
Gastrointestinal Disease	39	0	0 - 15	18	6	0 - 89
Gynecologic Disease	7	0	0 -100	4	0	0 -100
Low-Risk Heart Disease	79	1	1 - 10	65	0	1 - 8
Musculoskeletal/Skin Conditions	32	3	0 - 59	25	4	0 - 99
Neuropsychiatric/Sensory Disease	5	0	0 - 98	5	0	0 -100
Urologic Disease	7	0	0 -100	13	8	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#):	76
Occupancy Rate (%):	35
Ownership/Control:	Private, For Profit

STAFFING

Total Number of Physicians:	37
Percent of Physicians Who Are Board Certified Specialists:	14
Interns and Residents:	0
Registered Nurses:	37
Licensed Practical Nurses:	16

SPECIALTY SERVICES

Shock/Trauma Unit:	Yes
Burn Unit:	No
Medical/Surgical Intensive Care:	Yes
Cardiac Intensive Care:	No
Organ Transplant Service:	No
Hospice Care:	No

WYOMING GENERAL HOSP

1238 GUYANDOTTE AVE
MULLENS, WV 25882

Medicare Hospital Provider Number: 510054

Diagnostic Category	Calender Year 1987			Calender Year 1986		
	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)	Cases	Actual Mortality Rate (%)	Range For Predicted Mortality (%)
All Cases	105	13	7 - 21	129	12	5 - 17
Cancer	2	100	12 - 98	2	100	7 - 91
Cerebrovascular Accidents	0	-	-	0	-	-
Gastrointestinal Catastrophes	0	-	-	0	-	-
Infectious Disease	1	100	0 - 98	0	-	-
Metabolic/Electrolyte Disorders	0	-	-	1	0	0 - 99
Pulmonary Disease	15	27	8 - 54	14	7	6 - 43
Renal Failure	0	-	-	0	-	-
Severe Acute Heart Disease	3	100	12 - 84	9	67	9 - 66
Severe Chronic Heart Disease	11	9	9 - 51	3	33	2 - 86
Severe Trauma	0	-	-	0	-	-
Gastrointestinal Disease	7	0	0 - 98	10	0	0 -100
Gynecologic Disease	0	-	-	0	-	-
Low-Risk Heart Disease	18	6	0 - 45	29	3	0 - 34
Musculoskeletal/Skin Conditions	12	0	0 - 82	9	0	0 -100
Neuropsychiatric/Sensory Disease	0	-	-	7	14	0 -100
Urologic Disease	2	0	0 -100	3	0	0 -100

HOSPITAL CHARACTERISTICS

SURVEY AND YEAR: AHA 1987

Total Beds (#): 25
Occupancy Rate (%): 20
Ownership/Control: Private, For Profit

STAFFING

Total Number of Physicians: 12
Percent of Physicians Who Are Board Certified Specialists: 33
Interns and Residents: 0
Registered Nurses: 9
Licensed Practical Nurses: 8

SPECIALTY SERVICES

Shock/Trauma Unit: No
Burn Unit: No
Medical/Surgical Intensive Care: No
Cardiac Intensive Care: No
Organ Transplant Service: No
Hospice Care: No

Technical Appendix

TECHNICAL APPENDIX

METHODOLOGY

The Data Base

The data that are analyzed in this report are drawn from the MEDPAR file, which is assembled and updated quarterly by the Bureau of Data Management and Strategy in HCFA. This file is constructed from information on hospitalizations submitted to HCFA by hospitals through fiscal intermediaries. Data obtained from the Social Security Administration also contribute to the file. The data include the age, sex and date of death of each Medicare beneficiary. Because each beneficiary is assigned a unique health insurance claim number, it is possible to link hospitalizations longitudinally. Prior hospitalizations and readmissions can be found, as well as the date of death, whenever and wherever it occurred.

The hospitalizations in this file are segregated by the year of discharge. The data used in these analyses were drawn from the 1985, 1986 and 1987 discharges. The update cycles used for these years were 12/31/87, 6/10/88 and 6/10/88, respectively.

The process of data management consisted of selecting discharges from acute-care hospitals, calculating analytical variables that required data from prior hospitalizations and selecting the last discharge for each beneficiary for 1986 and 1987. The following rules were used to select discharges from acute-care hospitals:

1) Include only discharges from short-term (general and specialty) hospitals. These hospitals have a 0 in the third position of their "provider number."

2) Exclude discharges from psychiatric units, rehabilitation units, swing-beds and alcohol/drug units. These records have "provider codes" of S, T, U and V, respectively.

3) Exclude discharges from special cost centers. These are designated by a 9 in the fourth position of the "provider number."

4) Exclude discharges where the date of death precedes the date of admission, because these are obvious data errors.

Variables dependent on data from prior hospitalizations were calculated as follows:

1) For each beneficiary, sort the discharges in descending order by "discharge date" and "admission date" and stack the discharges for the current and prior years.

2) For the last discharge in the current year, determine whether the beneficiary at admission was transfered from another hospital. Operationally, the "discharge destination" for the prior discharge must be coded as a discharge to a short-term hospital, and the "discharge date" for the prior discharge must be no more than one day prior to the "admission date" for the last discharge.

3) For each discharge, use the principal diagnosis (the first "diagnostic code") to determine the diagnostic category as defined in Table 2 of the Introduction. Diagnoses that are not listed in this table are placed in a residual category of intermediate risk.

4) For the last discharge of the current year, count the number of admissions by diagnostic category that occurred within the 182 days prior to the admission date for this discharge.

Subsequently, the last discharges for 1986 and 1987 were selected and segregated by diagnostic categories into separate files for analysis. Only hospitals that had discharges in 1987 were considered for publication. Canadian and emergency hospitals were excluded. Six other hospitals were excluded because they terminated operations prior to 1987 or because their "provider number" was invalid.

Mortality Rates

In this project, the definition of mortality used to calculate mortality rates was death within 30 days of admission. The choice of a fixed period of 30 days after admission avoids biases that might occur if in-hospital deaths only were counted. Sufficient followup is available to permit complete estimation of mortality rates based upon this choice. Choosing a specific discharge avoids multiple counts of the same death. The last discharge for the year is biased to higher short-term risk.

Diagnostic Categories

Lists of the ICD-9-CM codes included in each diagnostic category are found in Table 2 of the Introduction to this report. The lists were constructed to represent diagnostic categories that are medically coherent and rather homogeneous with respect to risk of death.

Grouping was performed by combining clinically related diagnostic clusters when associated mortality rates were similar to one another. For each primary diagnosis, these rates were calculated from the 5% random sample of Medicare discharges for 1985 and 1986. For instance, Klebsiella pneumonia (482.0, 1385 patients, observed mortality = 24.3%) and Pseudomonas pneumonia (482.1, 1416 patients, observed mortality = 25.2%) were combined in the Pulmonary Disease category, as were subarachnoid hemorrhage (430, 525 patients, observed mortality = 47.8%) and intracerebral hemorrhage (431, 2883 patients, observed mortality = 42.9%), in the Cerebrovascular Accidents category.

These aggregations are generally analogous to the categories used in the 1987 analysis, but are more risk-homogeneous. In some cases, risk categories were expanded to incorporate a broader range of related conditions associated with similar risks of subsequent mortality, such as expanding ophthalmology to include psychiatric and other sensory system disorders or expanding low risk orthopedic conditions to include low risk dermatologic and muscular disorders.

In other instances, conditions were transferred to new categories based on empirical evidence that associated mortality rates were higher or lower than previously anticipated. For example, cancer of the salivary gland, gums, mouth, and oropharynx (142-146, observed mortality = 8.8%) was moved from high risk cancer to the intermediate risk category (average mortality = 8.5%), paroxysmal ventricular tachycardia (427.1, observed mortality 8.9%) was moved from the severe acute heart disease to the intermediate risk category, acute and chronic gastric ulcers with perforation, with and without hemorrhage (531.1, 531.2, 531.5, 531.6, observed mortality = 21.8%) was moved from low risk GI disease to GI catastrophe, pneumonia due to H. influenzae (482.2, observed mortality = 8.6%) was moved from high risk pulmonary to the intermediate risk category, fracture of the femur (820, 821, observed mortality = 6.1%) was moved from high risk trauma to the intermediate risk category, and chronic glomerulonephritis and other nephritis and nephropathy (582, 583, observed mortality 2.2%) was moved from high risk renal to low risk urologic disease. The new categories were reviewed for clinical and coding consistency and face validity, and final adjustments were made. Final adjustments included combining myocardial infarctions in a single risk group since coding variations among institutions made separation into different categories problematic, and removing italicized ICD-9-CM diagnoses from named risk groups since they are not valid principal diagnoses.

Demographic Variables

As in 1987, age and sex variables were used to characterize each patient. The sex variable is an indicator variable, as shown in Table 1. The patient's age was expressed in the 1987 Mortality Release by indicator variables in six categories, 65, 65-69, 70-74, 75-79, 80-84, and 85. For the 1988 Mortality Release, the age relative to 65 years and the square of this variable, as shown in Table 1, replaced the categorical age variables.

Comorbidity Variables

As in 1987, the secondary diagnoses (0-4 in number, "diagnostic codes" 2-5) were used to construct variables indicating the presence of comorbidities. The eight comorbidity indicator variables used in the analyses are: diabetes (DI), chronic pulmonary disease (OP), cancer (CA), chronic liver disease (LV), chronic renal disease (RN), cerebral vascular degeneration or chronic psychosis (CE), hypertensive disease (HY) and chronic cardiovascular disease (CV). The ICD-9-CM codes defining these variables are the same as were used in 1987 and are listed in Table 3 of the Introduction.

Prior History Variables

In the 1987 Mortality Release, the number of prior admissions was not based on a fixed interval of time prior to the admission date for the last discharge of the year, but included only prior admissions with discharges in the same calendar year (1986). Also all admissions were counted without any distinction among the risks associated with various prior admissions. In the 1988 Mortality Release, prior admissions are counted for a fixed interval of six months prior to the admission date for the last discharge of the year, and separate counts of prior admissions are made for three risk levels. They are admissions with high, low and intermediate risk. In Table 2 of the Introduction, diagnostic categories are defined as high risk or low risk. The intermediate risk category is composed of ICD-9-CM codes not listed in that table. Indicator variables are defined for the high risk category, as shown in Table 1, as PH1 if there was one prior high risk admission, PH2 if there were two and PH3M if there were three or more. Similar variables are defined for low risk (PL1, PL2, PL3M) and intermediate risk (PU1, PU2, PU3M) admissions. The indicator variable TRIN records whether or not the patient was transfered into the hospital from another acute-care hospital.

Analytic Techniques

The principal analytic tool was logistic regression (see, for example, Cox (1970)). Because the diagnostic categories are mutually exclusive, the analyses to ascertain the influence of patient characteristics (demographics, comorbidities and prior histories) were carried out separately for each category.

The probability π that a patient dies within 30 days of admission depends on the patient's characteristics x_i. Table 1 lists the covariates used in the logistic model for this year's analysis. Generally the same variables were used across all diagnostic categories. There are some exceptions. For example, the variable sex is not included as a covariate in the analyses for the diagnostic category gynecologic disease. In all other cases, the model is the same, with the occasional omission of one or more variables because of estimation difficulties (See Tables 2 and 3).

The dependence of π on these variables is specified by a logistic model:

$$\log\ (\pi/(1-\pi)) = \Sigma_i \beta_i x_i.$$

The regression coefficients β_i are estimated by the method of maximum likelihood. It is possible then to estimate the probability of dying for a patient from his or her characteristics x_i. By averaging over all the patients for whom treatment in a given hospital is being evaluated, the estimated mortality rate for that hospital is found. This analysis is carried out for each individual diagnostic category (the 16 explicitly defined categories as well as the residual category). The coefficients for each diagnostic category are shown in Table 2 for the 1987 data and in Table 3 for the 1986 data. Blank spaces in these tables mean that the corresponding variables were not used in the model. This is the same as fixing the parameter estimates for the unused variables at zero. Calculations were performed using the SAS procedure LOGIST as described by the SAS Institute (1986).

In addition to the estimates of regression coefficients for the logistic regression model, Tables 2 and 3 also display the model chi-square, based on the likelihood ratio, the number of cases and the number of deaths, for each of the diagnostic categories. The model chi-square has 22 degrees of freedom in most cases. The exceptions occur when one or more variables are removed from the model. In these cases, the degrees of freedom are reduced by one for each variable removed from the model. In all cases, the model chi-square is highly significant ($P < 0.001$). Note that the coefficients from 1987 and 1986 data are generally similar, as can be seen clearly in Table 4. The major differences occur in low risk categories or when there are only a few cases associated with the variable. In these situations, the parameter estimates are less stable. For example, there are relatively few cases associated with the variables for three or more prior admissions within six months. The regression coefficients in Tables 2 and 3 were used to estimate the probability of death within 30 days of the last admission in 1987 or 1986 for a 1987 "average case" for each of the diagnostic categories, as shown in Table 4. The "average case" is a hypothetical "patient" whose characteristics correspond to average values of each variable within a diagnostic category. The mortality rate for this 1987 "average case" using the 1986 and 1987 coefficients is displayed in Table 4 along with the average observed mortality rate. Note the similarity of the data for 1986 and 1987. Note also that the average observed and the average predicted mortality rates must be equal, but that the predicted mortality rate for the "average case" differs from them somewhat because of the inverse logit transformation that is needed to convert the sum of the products of the average values of the variables and the regression coefficients to a probability of dying. Since there is no way to know that a given admission will result in the last discharge of the year, these equations generally should not be used for predicting the outcome for individual cases.

The second quantity required of the analyses was an estimate of the uncertainty in the mortality rate expressed as a range of predicted rates encompassing a specified proportion (95%) of the probable values. For this it is necessary to compute the variance of the probability of death at a given hospital.

There are two components of variance included in our calculation of the range of mortality for a hospital. The first is the sampling variance, which is estimated by:

$SV_j = B_j(1-B_j) / N_j,$

where

$B_j = (N_j p_j + 1) / (N_j + 2),$

and p_j is the observed proportion of persons who had died among the N_j persons at risk, within a specified diagnostic category (or overall). B_j is a Bayesian estimate of the probability of dying. The second component arises from the systematic differences among hospitals in the identified factors included in the logistic model. This contribution to the variance is estimated by:

$IHV_j = (1-(1/N_j))\ V$

where V, the inter-hospital variance, is

$V = \Sigma_j\ (P_j - \bar{P})^2\ (N_j / N_t).$

P_j is the predicted mortality rate and N_j is the number of cases at risk at hospital j. $N_t = \Sigma_j N_j$ is the total number of cases at risk and $\bar{P} = (\Sigma_j N_j P_j) / N_t$ is the average mortality rate, in the category under consideration. To see how this formula arises, consider the basic identity (Kendall, Stuart and Ord, 1983, p.212):

$Var(x) = E_\theta \{Var_{x|\theta}(x)\} + Var_\theta \{E_{x|\theta}(x)\}.$

When this formula is applied to a binomial random variable x, the result is

$Var(x) = n\ E_\theta \{\theta\}(1-E_\theta\{\theta\}) + n(n-1)\ Var_\theta\{\theta\}$

as given by Mosimann (1962, equation 36). From this it follows that

$$\mathrm{Var}(x/n) = \mathrm{Var}(x) / n^2 = (E_\theta\{\theta\}(1-E_\theta\{\theta\})) / n + (1-(1/n)) \mathrm{Var}\{\theta\}$$

where $V\{\theta\} = V$, the constant inter-hospital variance. Values of V for each diagnostic category are in Table 4.

The ranges of predicted mortality rates given in this publication encompass 95% of the probable values on a logit scale, which ensures that the range neither goes below zero nor above 100%. On the logit scale, the range of predicted values P is given by:

$$R_j = \log(P_j/(1-P_j)) \pm 1.96(\sqrt{SV_j + IHV_j}) / (P_j(1-P_j)).$$

Retransformed to the probability scale, the upper end of the range is:

$$\exp (R_+) / (1 + \exp(R_+))$$

and the lower end is:

$$\exp (R_-) / (1 + \exp(R_-))$$

where R_+ is the value of R taken with the + sign and R_- is the value of R taken with the - sign.

The tabulation of the numbers of cases at risk (i. e., the number of patients whose last discharge in 1987 was from the given hospital), of the percentage of these persons who died within 30 days of the date of admission for that hospitalization, and of the range of predicted mortality rates encompassing 95% of the probable values on the logit scale forms the core of the present publication. A similar display is also included for the 1986 data.

An implication that bears importantly on year-to-year stability of rankings is that there remain important sources of variability in outcomes associated with variations in patient characteristics (such as severity of illness) and other factors that have not been taken into account in the models used in the present analyses.

References

David R. Cox (1970) The Analysis of Binary Data, London: Chapman and Hall.

Maurice Kendall, Alan Stuart and J. Keith Ord (1983) The Advanced Theory of Statistics, Vol. 3, 4th Ed., New York: Macmillan.

James E. Mosimann (1962) "On the compound multinomial distribution, the multivariate β-distribution, and correlations among proportions," Biometrika, 49, 65-82.

SAS Institute Inc. (1986) SUGI Supplemental Library User's Guide, Version 5 Edition, Cary, NC: SAS Institute, Inc.

TABLE 1

Covariates used in the logistic models for the 1988 Hospital Mortality Release. Generally the same variables are used for all diagnostic categories. The two-letter codes for comorbidities are defined in terms of ICD-9-CM codes in Table 3 of the Introduction to this report.

Intercept	Constant added into the logistic model in all cases.

Demographics

RAG	Age of patient in years divided by 65.
RAGSQ	RAG squared.
SEX	An indicator variable: Male 0 and Female 1.

Comorbidities (Indicator variables)

DI	1 if patient has diabetes, 0 if not.
OP	1 if chronic pulmonary disease, 0 if not.
CA	1 if cancer, 0 if not.
LV	1 if chronic liver disease, 0 if not.
RN	1 if chronic renal disease, 0 if not.
CE	1 if cerebrovascular degeneration or chronic psychosis, 0 if not.
HY	1 if hypertensive disease, 0 if not.
CV	1 if chronic cardiovascular disease, 0 if not.

Prior Histories (Indicator variables)

PH1	1 if patient has had 1 recent high-risk admission, 0 if not.
PH2	1 if patient has had 2 recent high-risk admissions, 0 if not.
PH3M	1 if patient has had 3 recent high-risk admissions, 0 if not.
PL1	1 if patient has had 1 recent low-risk admission, 0 if not.
PL2	1 if patient has had 2 recent low-risk admissions, 0 if not.
PL3M	1 if patient has had 3 recent low-risk admissions, 0 if not.
PU1	1 if patient has had 1 recent medium-risk admission, 0 if not.
PU2	1 if patient has had 2 recent medium-risk admissions, 0 if not.
PU3M	1 if patient has had 3 recent medium-risk admissions, 0 if not.
TRIN	1 if patient was transfered into the hospital, 0 if not.

Recent means within six months (182 days) before the admission date on the last discharge.

Table 2

1987
Parameter Estimates

Conditions:

CA - Cancer
CE - Cerebrovascular accidents
EY - Neuropsychiatric and sensory disease
GC - Gastrintestinal catastrophes
GI - Gastrointestinal disease
GU - Urologic disease
GY - Gynecologic disease
HL - Low-risk heart disease
HM - Severe chronic heart disease
HS - Severe acute heart disease
ME - Metabolic/electrolyte disturbances
OP - Muskuloskeletal and cutaneous conditions
PN - Pulmonary disease
RN - Renal failure
SE - Infectious disease
TR - Severe trauma
UN - All other conditions

Table 2.1

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL
APPLIED TO THE LAST DISCHARGES FOR 1987

CONDITIONS	CA		CE		EY		GC		GI		GU	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE
INTERCEPT	-0.9591	0.1846	1.1997	0.2163	-5.2813	0.2800	-2.3087	0.2017	-3.5635	0.2663	-4.7226	0.4824
RAG	-1.6335	0.3285	-6.6151	0.3659	-1.5611	0.5229	-0.4696	0.3734	-5.5355	0.4572	-5.5282	0.8185
RAGSQ	1.3503	0.1465	3.7120	0.1544	2.2297	0.2447	1.2330	0.1746	4.2574	0.1972	4.4686	0.3499
SEX	-0.2402	0.0094	-0.0476	0.0099	-0.5750	0.0287	-0.1175	0.0199	-0.1243	0.0185	0.5935	0.0350
DI	-0.1024	0.0258	0.1020	0.0165	0.1759	0.0587	-0.1638	0.0415	0.2683	0.0400	0.4540	0.0636
OP	-0.0561	0.0141	0.1279	0.0185	0.3559	0.0436	0.0051	0.0359	0.2458	0.0285	0.1487	0.0535
CA	0.5768	0.0093	0.8097	0.0252	1.9331	0.0441	1.0668	0.0340	1.6400	0.0301	1.4296	0.0452
LV	1.3567	0.0417	0.9674	0.0741	0.8902	0.1032	0.9094	0.0259	1.3731	0.0523	1.4221	0.1900
RN	1.0472	0.0364	0.8796	0.0314	1.6159	0.0678	0.6804	0.0411	1.4903	0.0431	1.4730	0.0594
CE	-0.0632	0.0394	-0.6277	0.0291	0.2072	0.0601	-0.5066	0.0825	0.0970	0.0636	0.5856	0.0843
HY	-0.3680	0.0492	-0.0778	0.0226	-0.0419	0.1010	-0.3043	0.0760	-0.1481	0.0642	-0.0122	0.1146
CV	0.3520	0.0118	0.3532	0.0097	0.6803	0.0304	0.5708	0.0221	0.7706	0.0186	0.9333	0.0323
PH1	0.9049	0.0111	0.4668	0.0149	1.0171	0.0409	0.4431	0.0263	1.0073	0.0263	1.1523	0.0425
PH2	1.3110	0.0199	0.8399	0.0344	1.6964	0.0753	0.5912	0.0461	1.4578	0.0538	1.5987	0.0906
PH3M	1.5586	0.0339	1.2198	0.0752	1.9332	0.1458	0.5752	0.0666	1.8720	0.1031		
PU1	0.4216	0.0129	0.3815	0.0163	0.5417	0.0398	0.2922	0.0263	0.5258	0.0251	0.6359	0.0416
PU2	0.6721	0.0242	0.6588	0.0401	0.9497	0.0767	0.4900	0.0517	0.9993	0.0487	1.0869	0.0809
PU3M	0.8003	0.0291	0.7082	0.0782	1.4732	0.1082	0.5197	0.0815	1.0673	0.0858	1.5890	0.1328
TRIN	-0.2626	0.0293	-0.0471	0.0357	0.5169	0.1053	0.3129	0.0627	0.6705	0.0692	0.6464	0.1219
PL1	0.1573	0.0162	0.1208	0.0159	0.1455	0.0378	0.1427	0.0301	0.2183	0.0250	0.1653	0.0433
PL2	0.1772	0.0437	0.1758	0.0411	0.1414	0.0801	0.1743	0.0731	0.3797	0.0533	0.4906	0.0895
PL3M	0.1269	0.1044	0.3631	0.0888	0.0705	0.1537	0.1452	0.1591	0.2971	0.1094	0.8340	0.1643
TOTAL NUM.	216,565		240,896		245,185		52,907		451,765		277,784	
DEATHS	89,692		63,407		5,633		18,329		13,776		4,634	
MODEL CHI-SQ.	23,809		11,842		7,524		5,215		16,232		7,689	

Table 2.2

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL
APPLIED TO THE LAST DISCHARGES FOR 1987

CONDITIONS	GY		HL		HM		HS		ME		OP	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST SE	EST	SE	
INTERCEPT	-9.1786	0.3010	-3.1645	0.2327	-1.9582	0.1666	-0.3864	0.1743	-3.2048	0.2537	-3.3135	0.2154
RAG			-4.6780	0.4036	-1.7762	0.2847	-3.4967	0.3051	0.2668	0.4302	-5.8135	0.3778
RAGSQ	2.3124	0.2106	3.3811	0.1750	1.7348	0.1215	2.6778	0.1335	0.8351	0.1827	4.2440	0.1665
SEX			-0.2982	0.0129	-0.2375	0.0092	-0.0383	0.0088	-0.4303	0.0160	-0.4685	0.0192
DI	0.9843	0.2244	0.2989	0.0241	-0.0471	0.0155	0.1744	0.0155	-0.0804	0.0329	0.3664	0.0349
OP	0.1323	0.2781	0.2005	0.0200	0.0032	0.0117	-0.1526	0.0142	0.0243	0.0273	0.4635	0.0297
CA	2.1844	0.1861	1.5089	0.0244	0.8028	0.0211	0.5563	0.0256	1.6174	0.0200	1.8846	0.0285
LV	1.8871	0.5508	1.2272	0.0787	0.7108	0.0435	1.0323	0.0751	0.8660	0.0693	1.5729	0.0798
RN	2.2304	0.3106	1.1843	0.0297	0.7261	0.0159	0.8167	0.0253	0.6416	0.0304	1.6414	0.0448
CE	0.3470	0.4731	0.0348	0.0444	-0.0814	0.0318	-0.5037	0.0376	-0.2641	0.0316	0.2949	0.0490
HY	0.3073	0.3791	-0.1699	0.0362	-0.3986	0.0280	-0.2861	0.0250	-0.2003	0.0612	0.0462	0.0641
CV	1.3402	0.1349	0.5437	0.0133	0.0804	0.0092	0.2520	0.0093	0.6250	0.0174	0.9847	0.0193
PH1	1.6812	0.1924	0.8796	0.0162	0.6334	0.0106	0.4255	0.0132	0.5445	0.0190	1.0584	0.0288
PH2	2.9031	0.4044	1.4401	0.0306	0.9506	0.0165	0.8011	0.0285	0.7757	0.0346	1.4467	0.0623
PH3M			2.0347	0.0535	1.1726	0.0231	1.1723	0.0571	1.0184	0.0616	2.1872	0.1133
PU1	0.9758	0.1835	0.4561	0.0188	0.3210	0.0128	0.3565	0.0153	0.3166	0.0200	0.4935	0.0279
PU2	1.1076	0.4287	0.8606	0.0392	0.5318	0.0270	0.6332	0.0372	0.4251	0.0382	0.9696	0.0545
PU3M	1.5589	0.6383	1.1950	0.0658	0.6545	0.0489	0.9770	0.0669	0.6245	0.0574	1.4334	0.0845
TRIN	1.3584	0.8502	0.6728	0.0247	0.4610	0.0362	-0.4480	0.0235	0.3256	0.1310	0.8660	0.0862
PL1	-0.3050	0.2295	0.1905	0.0159	0.1086	0.0133	0.1103	0.0139	0.0448	0.0232	0.0407	0.0270
PL2	0.6264	0.4710	0.2546	0.0299	0.1217	0.0300	0.1501	0.0323	0.0580	0.0568	0.0861	0.0616
PL3M			0.4261	0.0480	0.2047	0.0572	0.3722	0.0619	-0.1159	0.1335	-0.0071	0.1383
TOTAL NUM.	61,870		818,849		311,444		246,665		105,282		585,696	
DEATHS	273		27,786		70,762		94,172		26,485		13,186	
MODEL CHI-SQ	667		21,104		19,097		14,457		14,966		18,616	

Table 2.3

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL
APPLIED TO THE LAST DISCHARGES FOR 1987

CONDITIONS	PN		RN		SE		TR		UN	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE
INTERCEPT	-2.6009	0.1260	-4.7164	0.2568	-2.2654	0.1841	-1.4983	0.4342	-3.5263	0.0652
RAG	-1.1518	0.2161	2.4880	0.4744	-0.2282	0.3274	-1.3583	0.7978	-2.4574	0.1146
RAGSQ	1.7081	0.0927	0.5723	0.2186	0.9669	0.1465	1.4598	0.3676	2.4350	0.0507
SEX	-0.3345	0.0086	-0.1322	0.0252	-0.1198	0.0162	-0.2443	0.0435	-0.2930	0.0052
DI	0.1040	0.0182	0.1180	0.0406	-0.0070	0.0271	-0.0629	0.1099	0.1689	0.0104
OP	-0.3019	0.0103	0.2304	0.0498	-0.0529	0.0308	-0.2491	0.0836	0.2396	0.0074
CA	1.0701	0.0137	0.9455	0.0430	0.7369	0.0237	0.8208	0.1094	1.1744	0.0070
LV	0.6490	0.0482	1.2631	0.1042	0.9764	0.0597	1.1583	0.2114	1.4285	0.0192
RN	0.8493	0.0215	-0.0693	0.0369	0.7499	0.0313	1.1097	0.1679	1.0659	0.0115
CE	0.0284	0.0187	-0.0107	0.0758	-0.3244	0.0425	-0.4878	0.1103	0.0186	0.0146
HY	-0.2986	0.0327	-0.3446	0.0479	-0.3185	0.0673	-0.1716	0.1790	-0.2222	0.0186
CV	0.3876	0.0086	0.6419	0.0259	0.5171	0.0175	0.5752	0.0469	0.6601	0.0053
PH1	0.6818	0.0105	0.3766	0.0300	0.5626	0.0199	0.1086	0.0694	0.9182	0.0069
PH2	0.9608	0.0192	0.6510	0.0520	0.7310	0.0368	0.3808	0.1633	1.3266	0.0137
PH3M	1.2271	0.0338	1.0370	0.0839	0.9597	0.0658	0.9237	0.3318	1.6233	0.0251
PU1	0.5299	0.0114	0.3242	0.0317	0.4128	0.0199	0.2128	0.0718	0.4829	0.0064
PU2	0.8180	0.0227	0.4157	0.0577	0.6202	0.0363	0.4006	0.1684	0.7516	0.0109
PU3M	1.0552	0.0378	0.7940	0.0869	0.7960	0.0558	0.8103	0.3126	0.7356	0.0146
TRIN	0.1327	0.0419	0.1808	0.0533	0.4457	0.0721	-0.1722	0.1057	0.4225	0.0173
PL1	0.2341	0.0135	0.1925	0.0355	0.1490	0.0235	-0.0263	0.0720	0.1152	0.0078
PL2	0.2659	0.0337	0.3193	0.0797	0.2329	0.0566	-0.2338	0.1915	0.1074	0.0187
PL3M	0.2878	0.0754	0.4619	0.1810	0.2501	0.1322	0.2520	0.3722	0.0855	0.0407
TOTAL NUM.	339,986		33,325		77,856		11,777		2,200,419	
DEATHS	87,977		12,531		27,664		3,306		187,048	
MODEL CHI-SQ	38,547		6,125		6,964		621		144,234	

Table 3

1986
Parameter Estimates

Conditions:

CA - Cancer
CE - Cerebrovascular accidents
EY - Neuropsychiatric and sensory disease
GC - Gastrintestinal catastrophes
GI - Gastrointestinal disease
GU - Urologic disease
GY - Gynecologic disease
HL - Low-risk heart disease
HM - Severe chronic heart disease
HS - Severe acute heart disease
ME - Metabolic/electrolyte disturbances
OP - Muskuloskeletal and cutaneous conditions
PN - Pulmonary disease
RN - Renal failure
SE - Infectious disease
TR - Severe trauma
UN - All other conditions

Table 3.1

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL APPLIED TO THE LAST DISCHARGES FOR 1986

CONDITIONS	CA		CE		EY		GC		GI		GU	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE
INTERCEPT	-0.6935	0.1711	1.2702	0.2119	-5.0334	0.2787	-2.4782	0.2041	-4.6046	0.2977	-4.9166	0.4960
RAG	-2.0718	0.3060	-6.6604	0.3596	-2.0634	0.5218	-0.1881	0.3780	-3.7139	0.5078	-5.3277	0.8391
RAGSQ	1.5499	0.1373	3.7428	0.1522	2.4025	0.2450	1.1097	0.1769	3.4668	0.2170	4.5152	0.3568
SEX	-0.2593	0.0092	-0.0565	0.0099	-0.6174	0.0289	-0.1210	0.0201	-0.0971	0.0185	0.4567	0.0341
DI	-0.0272	0.0262	0.0901	0.0168	0.1705	0.0602	-0.1277	0.0430	0.3501	0.0402	0.3537	0.0657
OP	-0.1000	0.0144	0.1143	0.0191	0.3318	0.0449	0.0242	0.0366	0.2072	0.0296	0.3862	0.0496
CA	0.5851	0.0092	0.8364	0.0258	1.8688	0.0467	1.0402	0.0349	1.5772	0.0309	1.3949	0.0443
LV	1.2564	0.0407	0.9586	0.0740	1.1024	0.0990	0.8965	0.0259	1.2942	0.0551	1.4362	0.1772
RN	1.0298	0.0361	0.9586	0.0318	1.5581	0.0702	0.6505	0.0412	1.6787	0.0420	1.4506	0.0577
CE	-0.0221	0.0400	-0.6970	0.0305	0.3764	0.0591	-0.4242	0.0824	0.0921	0.0657	0.4479	0.0916
HY	-0.3215	0.0467	-0.0427	0.0218	-0.1194	0.1018	-0.1737	0.0736	-0.1337	0.0618	-0.0633	0.1163
CV	0.3175	0.0118	0.3192	0.0097	0.7138	0.0305	0.5685	0.0226	0.7724	0.0188	0.8915	0.0318
PH1	0.8905	0.0108	0.4851	0.0147	1.1647	0.0401	0.5078	0.0264	1.0110	0.0263	1.0662	0.0423
PH2	1.3003	0.0186	0.8945	0.0343	1.5354	0.0800	0.5598	0.0463	1.4630	0.0545	1.6150	0.0845
PH3M	1.5546	0.0307	1.2319	0.0715	2.1298	0.1384	0.7163	0.0638	1.9491	0.0945	1.9744	0.1628
PU1	0.4014	0.0125	0.3670	0.0161	0.5563	0.0395	0.2703	0.0267	0.5007	0.0252	0.7208	0.0389
PU2	0.7303	0.0237	0.6878	0.0381	1.0727	0.0727	0.4299	0.0509	0.8482	0.0498	1.0602	0.0766
PU3M	0.7999	0.0287	0.9325	0.0753	1.3039	0.1118	0.4267	0.0799	1.2691	0.0786	1.5561	0.1256
TRIN	-0.2505	0.0292	-0.1440	0.0353	0.6729	0.1012	0.3272	0.0622	0.6357	0.0736	0.2013	0.1316
PL1	0.1639	0.0158	0.1246	0.0157	0.1131	0.0377	0.1974	0.0297	0.2120	0.0248	0.2379	0.0404
PL2	0.2254	0.0418	0.2646	0.0388	0.1614	0.0778	0.3439	0.0705	0.2968	0.0537	0.4307	0.0839
PL3M	0.1770	0.0989	0.2803	0.0871	-0.1251	0.1570	0.3168	0.1550	0.4594	0.0995	0.4725	0.1783
TOTAL NUM	222,229		238,401		270,607		52,534		461,326		271,619	
DEATHS	93,522		64,594		5,542		18,040		13,703		4,922	
MODEL CHISQ	25,026		12,188		7,273		5,175		16,023		8,032	

Table 3.2

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL
APPLIED TO THE LAST DISCHARGES FOR 1986 10

CONDITIONS	GY		HL		HM		HS		ME		OP	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE
INTERCEPT	-6.0902	1.4498	-3.4160	0.2212	-1.6133	0.1692	-0.5198	0.1701	-2.5712	0.2549	-3.7309	0.2242
RAG	-5.5378	2.5669	-4.2268	0.3845	-2.4500	0.2892	-3.1937	0.2987	-1.1829	0.4326	-5.0932	0.3922
RAGSQ	4.7783	1.1535	3.1875	0.1673	2.0516	0.1233	2.5477	0.1310	1.5576	0.1840	3.9324	0.1723
SEX			-0.3070	0.0130	-0.2495	0.0092	-0.0478	0.0087	-0.4780	0.0163	-0.4855	0.0193
DI	0.1866	0.3101	0.2941	0.0250	-0.0197	0.0160	0.1450	0.0158	0.0318	0.0342	0.3539	0.0365
OP	0.5395	0.2405	0.1872	0.0207	0.0077	0.0120	-0.1629	0.0144	0.0252	0.0287	0.3840	0.0315
CA	2.2193	0.1759	1.4997	0.0255	0.8415	0.0212	0.6057	0.0259	1.6491	0.0208	1.9165	0.0288
LV	1.6894	0.6300	1.1551	0.0807	0.8547	0.0438	1.1809	0.0751	0.9253	0.0716	1.5156	0.0806
RN	2.6680	0.2904	1.2739	0.0302	0.7806	0.0164	0.8464	0.0253	0.6618	0.0312	1.6090	0.0468
CE	0.9116	0.3657	0.0700	0.0454	-0.1465	0.0332	-0.4865	0.0385	-0.2090	0.0328	0.2731	0.0516
HY	-0.5363	0.5140	-0.1274	0.0348	-0.3400	0.0270	-0.3097	0.0243	-0.2524	0.0613	0.0238	0.0638
CV	1.3407	0.1327	0.5839	0.0133	0.1184	0.0092	0.2506	0.0090	0.6640	0.0177	1.0189	0.0195
PH1	1.0216	0.2113	0.9189	0.0161	0.6290	0.0106	0.4733	0.0130	0.5411	0.0194	0.9992	0.0292
PH2	1.6429	0.5046	1.4469	0.0310	0.9750	0.0166	0.8402	0.0282	0.8648	0.0347	1.5330	0.0602
PH3M			1.9382	0.0537	1.2485	0.0234	1.2165	0.0565	0.9935	0.0616	2.0814	0.1047
PU1	1.1173	0.1706	0.4277	0.0188	0.3470	0.0128	0.3501	0.0151	0.3306	0.0202	0.5565	0.0273
PU2	2.1093	0.2979	0.8318	0.0382	0.5611	0.0267	0.6626	0.0353	0.5036	0.0384	0.9047	0.0549
PU3M	2.2081	0.6138	0.9628	0.0702	0.7711	0.0481	0.9840	0.0650	0.6713	0.0572	1.3180	0.0858
TRIN	0.9013	0.7009	0.7265	0.0258	0.5468	0.0377	-0.3246	0.0243	0.2211	0.1395	0.7031	0.0868
PL1	0.4276	0.1768	0.1796	0.0160	0.1214	0.0133	0.1137	0.0136	0.0428	0.0233	0.0564	0.0266
PL2	0.9956	0.3936	0.2855	0.0294	0.1428	0.0298	0.2299	0.0313	0.0182	0.0546	0.1999	0.0587
PL3M	0.2168	1.1080	0.4296	0.0471	0.1918	0.0573	0.2938	0.0630	-0.2231	0.1276	0.3776	0.1113
TOTAL NUM	60,709		806,069		306,819		252,802		106,268		598,973	
DEATHS	292		27,612		71,429		98,629		25,226		12,993	
MODEL CHISQ	742		21,313		20,525		15,388		15,173		18,431	

Table 3.3

PARAMETER ESTIMATES(EST) AND STANDARD ERRORS(SE) FROM THE 1988 MODEL APPLIED TO THE LAST DISCHARGES FOR 1986

CONDITIONS	PN		RN		SE		TR		UN	
VARIABLES	EST	SE	EST	SE	EST	SE	EST	SE	EST	SE
INTERCEPT	-2.4297	0.1257	-5.3676	0.2513	-1.9628	0.1900	-1.2194	0.4088	-3.6987	0.0657
RAG	-1.6417	0.2157	4.0378	0.4657	-0.8787	0.3385	-1.6280	0.7616	-2.1326	0.1156
RAGSQ	1.9832	0.0927	-0.1729	0.2153	1.3268	0.1517	1.5136	0.3558	2.3068	0.0511
SEX	-0.3399	0.0087	-0.1521	0.0249	-0.1357	0.0166	-0.2379	0.0439	-0.3210	0.0051
DI	0.0955	0.0189	0.1173	0.0406	-0.0102	0.0289	0.1980	0.1100	0.1557	0.0107
OP	-0.3001	0.0106	0.1944	0.0515	-0.0513	0.0332	-0.3725	0.0878	0.2494	0.0076
CA	1.0634	0.0142	1.0241	0.0434	0.7422	0.0249	1.1083	0.1114	1.1908	0.0069
LV	0.8483	0.0480	1.5236	0.1083	0.9560	0.0634	1.1229	0.2031	1.4421	0.0190
RN	0.9741	0.0217	-0.0975	0.0366	0.8834	0.0323	1.1905	0.1593	1.0938	0.0116
CE	0.0463	0.0197	-0.1517	0.0812	-0.2689	0.0439	-0.9687	0.1333	0.0093	0.0150
HY	-0.3062	0.0315	-0.4059	0.0461	-0.3765	0.0692	-0.5217	0.1900	-0.2185	0.0183
CV	0.3822	0.0087	0.6109	0.0257	0.5128	0.0183	0.5865	0.0477	0.6784	0.0053
PH1	0.7077	0.0107	0.3839	0.0296	0.5894	0.0203	0.0373	0.0718	0.8865	0.0069
PH2	1.0172	0.0193	0.6771	0.0504	0.7663	0.0367	0.4404	0.1499	1.3351	0.0135
PH3M	1.2355	0.0334	0.8575	0.0795	1.0428	0.0657	0.7899	0.3126	1.6613	0.0244
PU1	0.5472	0.0115	0.3206	0.0310	0.3753	0.0205	0.1126	0.0720	0.4908	0.0063
PU2	0.8525	0.0231	0.6637	0.0561	0.6278	0.0369	0.2373	0.1725	0.8060	0.0106
PU3M	1.0659	0.0374	0.7923	0.0922	0.8401	0.0550	0.8693	0.2744	0.8532	0.0140
TRIN	0.1941	0.0435	0.1664	0.0511	0.4250	0.0740	-0.1804	0.1057	0.4715	0.0173
PL1	0.2260	0.0135	0.1230	0.0347	0.1273	0.0238	-0.0378	0.0724	0.1093	0.0077
PL2	0.1862	0.0334	0.4177	0.0799	0.2285	0.0558	0.3079	0.1735	0.1382	0.0181
PL3M	0.3574	0.0720	0.6154	0.1578	0.4217	0.1292	-0.6078	0.4822	0.0787	0.0385
TOTAL NUM	338,897		34,173		73,283		11,730		2,229,542	
DEATHS	86,566		13,299		26,783		3,326		190,843	
MODEL CHISQ	40,378		6,793		7,093		688		150,640	

Table 4

Comparison of 1986 and 1987 Parameter Estimates

Table 4.1

Diagnostic Category: Cancer(CA)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-0.694	-0.959
RAG	1.134	-2.072	-1.633
RAGSQ	1.286	1.550	1.350
SEX	0.487	-0.259	-0.240
DI	0.034	-0.027	-0.102
OP	0.126	-0.100	-0.056
CA	0.485	0.585	0.577
LV	0.014	1.256	1.357
RN	0.018	1.030	1.047
CE	0.014	-0.022	-0.063
HY	0.010	-0.321	-0.368
CV	0.191	0.318	0.352
PH1	0.221	0.890	0.905
PH2	0.060	1.300	1.311
PH3M	0.021	1.555	1.559
PU1	0.150	0.401	0.422
PU2	0.038	0.730	0.672
PU3M	0.260	0.800	0.800
TRIN	0.025	-0.251	-0.263
PL1	0.087	0.164	0.157
PL2	0.011	0.225	0.177
PL3M	0.002	0.177	0.127
TOTAL CASES		222,229	216,565
DEATHS		93,522	89,692
Mortality	Average Case	45.1%	44.9%
	Observed	42.1%	41.4%
Interhospital Variance		0.00137	0.00130
MODEL CHISQ		25,026	23,809

Table 4.2

Diagnostic Category: CEREBROVASCULAR ACCIDENTS(CE)

VARIABLES		Coefficients	
		1986	**1987**
Names	1987 Average Case		
INTERCEPT	1	1.270	1.200
RAG	1.192	-6.660	-6.615
RAGSQ	1.422	3.743	3.712
SEX	0.582	-0.057	-0.048
DI	0.093	0.090	0.102
OP	0.070	0.114	0.128
CA	0.300	0.836	0.810
LV	0.003	0.959	0.967
RN	0.019	0.959	0.880
CE	0.038	-0.697	-0.628
HY	0.048	-0.043	-0.078
CV	0.382	0.319	0.353
PH1	0.107	0.485	0.467
PH2	0.015	0.895	0.840
PH3M	0.003	1.232	1.220
PU1	0.081	0.367	0.381
PU2	0.011	0.688	0.659
PU3M	0.003	0.932	0.708
TRIN	0.018	-0.144	-0.047
PL1	0.093	0.125	0.121
PL2	0.012	0.265	0.176
PL3M	0.002	0.280	0.363
TOTAL CASES		**238,401**	**240,896**
DEATHS		**64,594**	**63,407**
Mortality	**Average Case**	**29.3%**	**28.3%**
	Observed	**27.1%**	**26.3%**
Interhospital Variance		**0.00044**	**0.00039**
MODEL CHISQ		**12,188**	**11,842**

Table 4.3

Diagnostic Category: NEUROPSYCHIATRIC/SENSORY(EY)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-5.033	-5.281
RAG	1.069	-2.063	-1.561
RAGSQ	1.143	2.402	2.230
SEX	0.580	-0.617	-0.575
DI	0.052	0.171	0.176
OP	0.074	0.332	0.356
CA	0.020	1.869	1.933
LV	0.011	1.102	0.890
RN	0.011	1.558	1.616
CE	0.052	0.376	0.207
HY	0.017	-0.119	-0.042
CV	0.177	0.714	0.680
PH1	0.042	1.165	1.017
PH2	0.006	1.535	1.696
PH3M	0.001	2.130	1.933
PU1	0.081	0.556	0.542
PU2	0.012	1.073	0.950
PU3M	0.004	1.304	1.473
TRIN	0.008	0.673	0.517
PL1	0.146	0.113	0.146
PL2	0.029	0.161	0.141
PL3M	0.009	-0.125	0.070
TOTAL CASES		270,607	245,185
DEATHS		5,542	5,633
Mortality	Average Case	1.14%	1.27%
	Observed	2.05%	2.30%
Interhospital Variance		0.00005	0.00006
MODEL CHISQ		7,273	7,524

Table 4.4

Diagnostic Category: GASTROINTESTINAL CATASTROPHES(GC)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-2.478	-2.309
RAG	1.124	-0.188	-0.470
RAGSQ	1.263	1.110	1.233
SEX	0.544	-0.121	-0.118
DI	0.061	-0.128	-0.164
OP	0.081	0.024	0.005
CA	0.083	1.040	1.067
LV	0.175	0.896	0.909
RN	0.062	0.651	0.680
CE	0.017	-0.424	-0.507
HY	0.019	-0.174	-0.304
CV	0.249	0.568	0.571
PH1	0.154	0.508	0.443
PH2	0.043	0.560	0.591
PH3M	0.02	0.716	0.575
PU1	0.155	0.270	0.292
PU2	0.034	0.430	0.490
PU3M	0.013	0.427	0.520
TRIN	0.022	0.327	0.313
PL1	0.112	0.197	0.143
PL2	0.017	0.344	0.174
PL3M	0.003	0.317	0.145
TOTAL CASES		52,534	52,907
DEATHS		18,040	18,329
Mortality	Average Case	32.5%	32.4%
	Observed	34.3%	34.6%
Interhospital Variance		0.00232	0.00229
MODEL CHISQ		5,175	5,215

Table 4.5

Diagnostic Category: GASTROINTESTINAL DISEASE(GI)

		Coefficients	
		1986	**1987**
Names	1987 Average Case		
INTERCEPT	1	-4.605	-3.563
RAG	1.127	-3.714	-5.535
RAGSQ	1.270	3.467	4.257
SEX	0.558	-0.097	-0.124
DI	0.045	0.350	0.268
OP	0.093	0.207	0.246
CA	0.026	1.577	1.640
LV	0.013	1.294	1.373
RN	0.013	1.679	1.490
CE	0.016	0.092	0.097
HY	0.021	-0.134	-0.148
CV	0.228	0.772	0.771
PH1	0.046	1.011	1.007
PH2	0.006	1.463	1.458
PH3M	0.001	1.949	1.872
PU1	0.087	0.501	0.526
PU2	0.013	0.848	0.999
PU3M	0.003	1.269	1.067
TRIN	0.006	0.636	0.670
PL1	0.117	0.212	0.218
PL2	0.018	0.297	0.380
PL3M	0.004	0.459	0.297
TOTAL CASES		**461,326**	**451,765**
DEATHS		**13,703**	**13,776**
Mortality	**Average Case**	**1.8%**	**1.8%**
	Observed	**3.0%**	**3.0%**
Interhospital Variance		**0.00004**	**0.00004**
MODEL CHISQ		**16,023**	**16,232**

Table 4.6

Diagnostic Category: **UROLOGIC DISEASE(GU)**

VARIABLES		**Coefficients**	
		1986	**1987**
Names	1987 Average Case		
INTERCEPT	1	-4.917	-4.723
RAG	1.120	-5.328	-5.528
RAGSQ	1.254	4.515	4.469
SEX	0.157	0.457	0.593
DI	0.039	0.354	0.454
OP	0.080	0.386	0.149
CA	0.038	1.395	1.430
LV	0.002	1.436	1.422
RN	0.017	1.451	1.473
CE	0.013	0.448	0.586
HY	0.015	-0.063	-0.012
CV	0.175	0.892	0.933
PH1	0.040	1.066	1.152
PH2	0.005	1.615	1.599
PH3M	0.000	1.974	0.000
PU1	0.078	0.721	0.636
PU2	0.011	1.060	1.087
PU3M	0.003	1.556	1.589
TRIN	0.006	0.201	0.646
PL1	0.119	0.238	0.165
PL2	0.017	0.431	0.491
PL3M	0.004	0.473	0.834
TOTAL CASES		**271,619**	**277,784**
DEATHS		**4,922**	**4,634**
Mortality	**Average Case**	**0.9%**	**0.8%**
	Observed	**1.8%**	**1.7%**
Interhospital **Variance**		**0.00006**	**0.00005**
MODEL CHISQ		**8,032**	**7,689**

Table 4.7

Diagnostic Category: GYNECOLOGIC DISEASE(GY)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-6.090	-9.179
RAG	1.091	-5.538	
RAGSQ	1.190	4.778	2.312
SEX	1		
DI	0.025	0.187	0.984
OP	0.038	0.540	0.132
CA	0.012	2.219	2.184
LV	0.002	1.689	1.887
RN	0.005	2.668	2.230
CE	0.009	0.912	0.347
HY	0.012	-0.536	0.307
CV	0.096	1.341	1.340
PH1	0.012	1.022	1.681
PH2	0.001	1.643	2.903
PH3M	0		
PU1	0.037	1.117	0.976
PU2	0.004	2.109	1.108
PU3M	0.001	2.208	1.559
TRIN	0.001	0.901	1.358
PL1	0.062	0.428	-0.305
PL2	0.006	0.996	0.626
PL3M	0	0.217	
TOTAL CASES		60,709	61,870
DEATHS		292	273
Mortality	Average Case	0.2%	0.2%
	Observed	0.5%	0.4%
Interhospital Variance		0.00003	0.00003
MODEL CHISQ		742	667

Table 4.8

Diagnostic Category: LOW-RISK HEART DISEASE(HL)

VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-3.416	-3.165
RAG	1.132	-4.227	-4.678
RAGSQ	1.281	3.188	3.381
SEX	0.550	-0.307	-0.298
DI	0.061	0.294	0.299
OP	0.093	0.187	0.200
CA	0.020	1.500	1.509
LV	0.003	1.155	1.227
RN	0.016	1.274	1.184
CE	0.019	0.070	0.035
HY	0.038	-0.127	-0.170
CV	0.517	0.584	0.544
PH1	0.090	0.919	0.880
PH2	0.012	1.447	1.440
PH3M	0.003	1.938	2.035
PU1	0.078	0.428	0.456
PU2	0.011	0.832	0.861
PU3M	0.003	0.963	1.195
TRIN	0.036	0.726	0.673
PL1	0.171	0.180	0.190
PL2	0.035	0.286	0.255
PL3M	0.011	0.430	0.426
TOTAL CASES		806,069	818,849
DEATHS		27,612	27,786
Mortality	Average Case	2.5%	2.4%
	Observed	3.4%	3.4%
Interhospital Variance		0.00002	0.00002
MODEL CHISQ		21,313	21,104

Table 4.9

Diagnostic Category: SEVERE CHRONIC HEART DISEASE (HM)

VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-1.613	-1.958
RAG	1.187	-2.450	-1.776
RAGSQ	1.409	2.052	1.735
SEX	0.551	-0.249	-0.237
DI	0.102	-0.020	-0.047
OP	0.187	0.008	0.003
CA	0.034	0.841	0.803
LV	0.008	0.855	0.711
RN	0.066	0.781	0.726
CE	0.020	-0.146	-0.081
HY	0.033	-0.340	-0.399
CV	0.594	0.118	0.080
PH1	0.202	0.629	0.633
PH2	0.061	0.975	0.951
PH3M	0.028	1.249	1.173
PU1	0.121	0.347	0.321
PU2	0.022	0.561	0.532
PU3M	0.006	0.771	0.654
TRIN	0.011	0.547	0.461
PL1	0.118	0.121	0.109
PL2	0.021	0.143	0.122
PL3M	0.005	0.192	0.205
TOTAL CASES		**306,819**	**311,444**
DEATHS		**71,429**	**70,762**
Mortality	**Average Case**	**21.1%**	**20.6%**
	Observed	**23.3%**	**22.7%**
Interhospital Variance		**0.00037**	**0.00032**
MODEL CHISQ		**20,525**	**19,097**

Table 4.10

Diagnostic Category:	SEVERE ACUTE HEART DISEASE(HS)		
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-0.520	-0.386
RAG	1.156	-3.194	-3.497
RAGSQ	1.336	2.548	2.678
SEX	0.482	-0.048	-0.038
DI	0.083	0.145	0.174
OP	0.108	-0.163	-0.153
CA	0.028	0.606	0.556
LV	0.003	1.181	1.032
RN	0.029	0.846	0.817
CE	0.015	-0.486	-0.504
HY	0.033	-0.310	-0.286
CV	0.675	0.251	0.252
PH1	0.137	0.473	0.426
PH2	0.023	0.840	0.801
PH3M	0.006	1.217	1.172
PU1	0.083	0.350	0.357
PU2	0.013	0.663	0.633
PU3M	0.004	0.984	0.977
TRIN	0.043	-0.325	-0.448
PL1	0.105	0.114	0.110
PL2	0.017	0.230	0.150
PL3M	0.005	0.294	0.372
TOTAL CASES		252,802	246,665
DEATHS		98,629	94,172
Mortality	Average Case	37.7%	36.5%
	Observed	39.0%	38.2%
Interhospital Variance		0.00062	0.00067
MODEL CHISQ		15,388	14,457

Table 4.11

Diagnostic Category: METABOLIC/ELECTROLYTE DISORDERS(ME)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-2.571	-3.205
RAG	1.209	-1.183	0.267
RAGSQ	1.462	1.558	0.835
SEX	0.639	-0.478	-0.430
DI	0.067	0.032	-0.080
OP	0.088	0.025	0.024
CA	0.164	1.649	1.617
LV	0.010	0.925	0.866
RN	0.057	0.662	0.642
CE	0.082	-0.209	-0.264
HY	0.019	-0.252	-0.200
CV	0.249	0.664	0.625
PH1	0.176	0.541	0.544
PH2	0.040	0.865	0.776
PH3M	0.012	0.993	1.018
PU1	0.165	0.331	0.317
PU2	0.036	0.504	0.425
PU3M	0.015	0.671	0.624
TRIN	0.003	0.221	0.326
PL1	0.124	0.043	0.045
PL2	0.019	0.018	0.058
PL3M	0.004	-0.223	-0.116
TOTAL CASES		106,268	105,282
DEATHS		25,226	26,485
Mortality	**Average Case**	20.8%	21.8%
	Observed	23.7%	25.2%
Interhospital Variance		0.00206	0.00216
MODEL CHISQ		15,173	14,966

Table 4.12

Diagnostic Category: MUSCULOSKELETAL/SKIN CONDITIONS(OP)

VARIABLES		**Coefficients**	
		1986	**1987**
Names	1987 Average Case		
INTERCEPT	1	-3.731	-3.313
RAG	1.121	-5.093	-5.814
RAGSQ	1.257	3.932	4.244
SEX	0.666	-0.485	-0.469
DI	0.059	0.354	0.366
OP	0.066	0.384	0.463
CA	0.024	1.916	1.885
LV	0.004	1.516	1.573
RN	0.010	1.609	1.641
CE	0.023	0.273	0.295
HY	0.017	0.024	0.046
CV	0.170	1.019	0.985
PH1	0.031	0.999	1.058
PH2	0.004	1.533	1.447
PH3M	0.001	2.081	2.187
PU1	0.066	0.557	0.494
PU2	0.009	0.905	0.970
PU3M	0.003	1.318	1.433
TRIN	0.004	0.703	0.866
PL1	0.123	0.056	0.041
PL2	0.018	0.200	0.086
PL3M	0.004	0.378	-0.007
TOTAL CASES		**598,973**	**585,696**
DEATHS		**12,993**	**13,186**
Mortality	**Average Case**	**1.2%**	**1.2%**
	Observed	**2.2%**	**2.3%**
Interhospital Variance		**0.00003**	**0.00004**
MODEL CHISQ		**18,431**	**18,616**

Table 4.13

Diagnostic Category: PULMONARY DISEASE (PN)			
VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-2.430	-2.601
RAG	1.191	-1.642	-1.152
RAGSQ	1.418	1.983	1.708
SEX	0.509	-0.340	-0.335
DI	0.055	0.096	0.104
OP	0.261	-0.300	-0.302
CA	0.084	1.063	1.070
LV	0.007	0.848	0.649
RN	0.031	0.974	0.849
CE	0.051	0.046	0.028
HY	0.020	-0.306	-0.299
CV	0.386	0.382	0.388
PH1	0.162	0.708	0.682
PH2	0.038	1.017	0.961
PH3M	0.012	1.235	1.227
PU1	0.134	0.547	0.530
PU2	0.028	0.852	0.818
PU3M	0.010	1.066	1.055
TRIN	0.008	0.194	0.133
PL1	0.095	0.226	0.234
PL2	0.014	0.186	0.266
PL3M	0.003	0.357	0.288
TOTAL CASES		338,897	339,986
DEATHS		86,566	87,977
Mortality	Average Case	22.3%	22.6%
	Observed	25.5%	25.9%
Interhospital Variance		0.00078	0.00072
MODEL CHISQ		40,378	38,547

Table 4.14

Diagnostic Category: RENAL FAILURE(RN)

VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-5.368	-4.716
RAG	1.112	4.038	2.488
RAGSQ	1.237	-0.173	0.572
SEX	0.493	-0.152	-0.132
DI	0.117	0.117	0.118
OP	0.061	0.194	0.230
CA	0.087	1.024	0.946
LV	0.014	1.524	1.263
RN	0.137	-0.097	-0.069
CE	0.026	-0.152	-0.011
HY	0.088	-0.406	-0.345
CV	0.349	0.611	0.642
PH1	0.224	0.384	0.377
PH2	0.058	0.677	0.651
PH3M	0.022	0.857	1.037
PU1	0.189	0.321	0.324
PU2	0.049	0.664	0.416
PU3M	0.021	0.792	0.794
TRIN	0.054	0.166	0.181
PL1	0.135	0.123	0.192
PL2	0.023	0.418	0.319
PL3M	0.004	0.615	0.462
TOTAL CASES		34,173	33,325
DEATHS		13,299	12,531
Mortality	Average Case	35.9%	33.0%
	Observed	38.9%	37.6%
Interhospital Variance		0.01353	0.01217
MODEL CHISQ		6,793	6,125

Table 4.15

Diagnostic Category: INFECTIOUS DISEASE(SE)			
VARIABLES		**Coefficients**	
		1986	**1987**
Names	1987 Average Case		
INTERCEPT	1	-1.963	-2.265
RAG	1.185	-0.879	-0.228
RAGSQ	1.404	1.327	0.967
SEX	0.578	-0.136	-0.120
DI	0.098	-0.010	-0.007
OP	0.073	-0.051	-0.053
CA	0.128	0.742	0.737
LV	0.016	0.956	0.976
RN	0.065	0.883	0.750
CE	0.041	-0.269	-0.324
HY	0.016	-0.376	-0.318
CV	0.267	0.513	0.517
PH1	0.184	0.589	0.563
PH2	0.045	0.766	0.731
PH3M	0.014	1.043	0.960
PU1	0.183	0.375	0.413
PU2	0.046	0.628	0.620
PU3M	0.019	0.840	0.796
TRIN	0.011	0.425	0.446
PL1	0.124	0.127	0.149
PL2	0.019	0.229	0.233
PL3M	0.003	0.422	0.250
TOTAL CASES		**73,283**	**77,856**
DEATHS		**26,783**	**27,664**
Mortality	**Average Case**	**34.5%**	**33.7%**
	Observed	**36.5%**	**35.5%**
Interhospital Variance		**0.00195**	**0.00168**
MODEL CHISQ		**7,093**	**6,964**

Table 4.16

Diagnostic Category: SEVERE TRAUMA(TR)

VARIABLES		Coefficients	
		1986	1987
Names	1987 Average Case		
INTERCEPT	1	-1.219	-1.498
RAG	1.161	-1.628	-1.358
RAGSQ	1.348	1.514	1.460
SEX	0.479	-0.238	-0.244
DI	0.039	0.198	-0.063
OP	0.075	-0.372	-0.249
CA	0.033	1.108	0.821
LV	0.008	1.123	1.158
RN	0.013	1.190	1.110
CE	0.048	-0.969	-0.488
HY	0.015	-0.522	-0.172
CV	0.246	0.586	0.575
PH1	0.119	0.037	0.109
PH2	0.015	0.440	0.381
PH3M	0.003	0.790	0.924
PU1	0.092	0.113	0.213
PU2	0.014	0.237	0.401
PU3M	0.004	0.869	0.810
TRIN	0.051	-0.180	-0.172
PL1	0.096	-0.038	-0.026
PL2	0.013	0.308	-0.234
PL3M	0.003	-0.608	0.252
TOTAL CASES		**11,730**	**11,777**
DEATHS		**3,326**	**3,306**
Mortality	**Average Case**	**26.3%**	**26.1%**
	Observed	**28.4%**	**28.1%**
Interhospital Variance		**0.00348**	**0.00303**
MODEL CHISQ		**688**	**621**

Table 4.17

Diagnostic Category: **ALL OTHER DISEASES (UN)**

VARIABLES		Coefficients	
		1986	**1987**
Names	1987 Average Case		
INTERCEPT	1	-3.699	-3.526
RAG	1.136	-2.133	-2.457
RAGSQ	1.290	2.307	2.435
SEX	0.581	-0.321	-0.293
DI	0.061	0.156	0.169
OP	0.122	0.249	0.240
CA	0.086	1.191	1.174
LV	0.008	1.442	1.429
RN	0.028	1.094	1.066
CE	0.032	0.009	0.019
HY	0.022	-0.219	-0.222
CV	0.275	0.678	0.660
PH1	0.081	0.886	0.918
PH2	0.014	1.335	1.327
PH3M	0.004	1.661	1.623
PU1	0.148	0.491	0.483
PU2	0.034	0.806	0.752
PU3M	0.018	0.853	0.736
TRIN	0.012	0.472	0.423
PL1	0.104	0.109	0.115
PL2	0.016	0.138	0.107
PL3M	0.003	0.079	0.086
TOTAL CASES		**2,229,542**	**2,200,419**
DEATHS		**190,843**	**187,048**
Mortality	**Average Case**	**6.1%**	**6.0%**
	Observed	**8.6%**	**8.5%**
Interhospital Variance		**0.00008**	**0.00007**
MODEL CHISQ		**150,640**	**144,234**

☆ U.S. GOVERNMENT PRINTING OFFICE: 1988— 2 2 5 - 6 7 5 / 0

CMS LIBRARY
3 8095 00015489 4

HCFA Pub. No. 00642